02/20/2006 22:41

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1.	NAME OF COMMITTEE (in full)	USE FEC MAILING LAB OR TYPE OR PRINT	EL Example:If typin over the lines	g, type		
1.	Libertarian National Committe	ee				1
						<u> </u>
Ш						
AD	DRESS (number and street)	2600 Virginia Ave NW				
Ė	Check if different	Suite 100				
L	than previously reported. (ACC)	Washington		DC	20037]
2.	FEC IDENTIFICATION NUM	IBER ▼	CITY A	STATE	ZIPC	ODE A
	C00255695	3	B. IS THIS REPORT	NEW (N) OR	AMENDED (A)	
4.	TYPE OF REPORT (Choose One)	(b) Monthly X Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report(C July 15	(c) 12-Day	Apr 20 (M4) Primary (12	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE) Runoff (12R)
	Quarterly Report(C October 15 Quarterly Report(C	Report for the		(12C) S	pecial (12G)	
	January 31 Quarterly Report(Y		lection on		in the State	
	July 31 Mid-Year Report(Non-electio Year Only) (MY)	Post -Election	,	G) R	unoff (30R)	Special (30S)
	Termination Repor	t Report for the	e:		in the	
	(IEN)	EI	lection on		State	
5.	Covering Period 0	01 2006	through	01 3	2006	
l ce	ertify that I have examined this	Report and to the best of my	y knowledge and belief it i	s true, correct and co	mplete.	
Тур	oe or Print Name of Treasurer	NEL1 - David Mark Ne	elson			
Sig	nature of Treasurer Ele <u>ctro</u>	nically Filed by NEL1 - D	avid Mark Nelson	Date	02 20	2006
NO	TE : Submission of false, erro	neous, or incomplete inform	nation may subject the per	son signing this Repo	ort to the penalties of 2 l	J.S.C 437g.
	Office Use Only				FEC FO (Rev. 02/2	

Image# 26980146580

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS

Page 2

F	Repor	t Covering the Period: From:	0 1 0 1	2006	To: 0 1	31
				COLUMN A This Period	Cal	COLUMN B endar Year-to-Date
6.	(a)	Cash on Hand January 1 Yellow 2006				-14339.51
	(b)	Cash on Hand at Begining of Reporting Period		-14339.51		
	(c)	Total Receipts (from Line 19)		92635.37		92635.37
	(d)	Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		78295.86		78295.86
7.	Tota	al Disbursements (from Line 31)		67509.64		67509.64
3.	Rep	sh on Hand at Close of porting Period by Stract Line 7 from Line 6(d))		10786.22		10786.22
9.	the	ots and Obligations owed TO committee (Itemize all on nedule C and/or Schedule D)		45.00		
10.	the	ots and Obligations owed BY committee (Itemize all on needule C and/or Schedule D)		140186.25		

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name Libertarian National Committee

Report Covering the Period:

From:

м м 0 1 01

^Y 2 0 0 6

то.

м м 0 1 ^D 3 1

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	17702.00	17702.00
	(ii) Unitemized	73535.87	73535.87
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	91237.87	91237.87
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	300.00	300.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	91537.87	91537.87
2.	Transfers From Affiliated/Other Party Committees	1097.50	1097.50
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
Ο.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	92635.37	92635.37
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	92635.37	92635.37

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 67509.64 67509.64 Expenditures..... (c) Total Operating Expenditures 67509.64 67509.64 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 0.00 0.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 67509.64 67509.64 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)

67509.64

67509.64

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	91537.87	91537.87
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	91537.87	91537.87
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	67509.64	67509.64
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	67509.64	67509.64

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 102 (check only one) X
Ar or	ny information copied from such Reports and Stator commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Libertarian National Committee			
33.	Full Name (Last, First, Middle Initial) Mett B Ausley Mailing Address 3412 Waccamaw Shore City Lake Waccamaw FEC ID number of contributing federal political committee. Name of Employer Cypress Pathology Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Frank Bond Mailing Address 9690 Deereco Rd City Timonium FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary General Other (specify) General Other (specify)	State NC C Occupation Physician Aggregate State MD C Occupation Informati	n e Year-to-Date ▼ 300.00 Zip Code 21093-6991	Date of Receipt M M D D 2 0 0 6 Transaction ID: SA11A1.178020 Amount of Each Receipt this Period 300.00 Contribution Date of Receipt M M D D 2 0 0 6 Transaction ID: SA11A1.179685 Amount of Each Receipt this Period 500.00 Contribution
D.	Full Name (Last, First, Middle Initial) Jeffrey Brindle Mailing Address 2701 Sioux Conifer Rd City Watertown FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State SD C Occupation Physician Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional))	1300.00
Т	OTAL This Period (last page this line number o	nlv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 102	
	EMIZED RECEIPTS		or each category of the	(check only one)	
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12	
_				13 14 15 16 17	
or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
	Libertarian National Committee				
A.				Date of Receipt	
	Mailing Address 5555 N Meade St			01 04 2006	
	City	State	Zip Code	Transaction ID: SA11A1.177947	
	Appleton	WI	54913-8382	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer CHN	Occupation Physician		Contribution	
	Receipt For:		Year-to-Date ▼		
	Primary General		000.00	7	
	Other (specify) ▼		600.00		
В.	Full Name (Last, First, Middle Initial) Harold W Cheney			Date of Receipt	
	Mailing Address 300 Pingree Dr			01 31 7 2006	
	City	State	Zip Code	Transaction ID: SA11A1.178559	
	Worthington	OH	43085-4039	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer OCLC	Occupation Programi		Contribution	
	Receipt For:		Year-to-Date ▼		
	Primary General	00 0		7	
	Other (specify) ▼		260.00		
C.	Full Name (Last, First, Middle Initial) Bruce Cohen			Date of Receipt	
	Mailing Address 34145 Pacific Coast Hi #244	ghway		01 30 7 2006	
	City	State	Zip Code	Transaction ID: SA11A1.177897	
	Dana Point	CA	92629	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer Cadwell Banker	Occupation Real Esta		Contribution	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		500.00	7	
	Other (specify) ▼		300.00		
s	UBTOTAL of Receipts This Page (optional)		······	1250.00	
\vdash			•		
T	OTAL This Period (last page this line number of	only)			

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 8 / 102
	Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
		13 14 15 16 17
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam	nents may not be sold or used by any perso e and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Libertarian National Committee		
Full Name (Last, First, Middle Initial) Michael C Colley		Date of Receipt
Mailing Address 444 Magnolia Dr		01 04 2006
City	State Zip Code	Transaction ID: SA11A1.179528
Gulf Shores	AL 36542-4408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Self Employed	Occupation Analyst	Contribution
	Aggregate Year-to-Date ▼	
Primary General		1
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Michael C Colley		Date of Receipt
Mailing Address 444 Magnolia Dr		01 10 / Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11A1.179794
Gulf Shores	AL 36542-4408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Self Employed	Occupation Analyst	Contribution
	Aggregate Year-to-Date ▼	7
Primary General	050.00	1
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Michael C Colley		Date of Receipt
Mailing Address 444 Magnolia Dr		01 11 / 2006
City	State Zip Code	Transaction ID: SA11A1.179866
Gulf Shores	AL 36542-4408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Solf Employed *	Occupation Analyst	Contribution
	Aggregate Year-to-Date ▼	
Primary General	850.00	1
Other (specify) ▼	000.00	
SUBTOTAL of Receipts This Page (optional)		700.00
TOTAL This Period (last page this line number only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 102
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Sta	itements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	ame and add	dress of any political committee to	o solicit contributions from such committee.
\backslash	NAME OF COMMITTEE (In Full)			
/	Libertarian National Committee			
	Full Name (Last, First, Middle Initial)			Data of Bassist
٦.	Kelvin Contreary Mailing Address 1 Wren St			Date of Receipt
				01 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.180029
	New Orleans	LA	70124-4121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
		10		Contribution
	Name of Employer Self	Occupation Physician		
	Receipt For:	<u> </u>	Year-to-Date ▼	
	Primary General			1
	Other (specify)		1000.00	
	Full Name (Last, First, Middle Initial)			
3.	Ronald Corry			Date of Receipt
	Mailing Address 1205 Plaza Del Toro	01 04 2006		
	City	State	Zip Code	Transaction ID: SA11A1.179531
	Sierra Vista	AZ	85635-4400	Amount of Each Receipt this Period
	FEC ID number of contributing	С		300.00
	federal political committee.			
	Name of Employer Information Requested	Occupation		Contribution
	<u> </u>	1	on Requested	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼	1	300.00	
Э.	Full Name (Last, First, Middle Initial) David DePriest			Date of Receipt
	Mailing Address 2632 Shadow Bluff Dr N	IE		M M / D D / Y Y Y Y
	City	State	Zip Code	0 1 1 3 2 0 0 6 Transaction ID: SA11A1.178049
	Oity		30062-2568	Amount of Each Receipt this Period
	Marietta	GA		
	Marietta FEC ID number of contributing	GA		
		C		50.00
	FEC ID number of contributing federal political committee. Name of Employer			
	FEC ID number of contributing federal political committee. Name of Employer DePriest Associates, Inc.	Occupation Consulta	n nt	50.00
	FEC ID number of contributing federal political committee. Name of Employer DePriest Associates, Inc. Receipt For:	Occupation Consulta	1	50.00
	FEC ID number of contributing federal political committee. Name of Employer DePriest Associates, Inc. Receipt For: Primary General	Occupation Consulta	n nt	50.00
	FEC ID number of contributing federal political committee. Name of Employer DePriest Associates, Inc. Receipt For:	Occupation Consulta	n nt Year-to-Date ▼	50.00
	FEC ID number of contributing federal political committee. Name of Employer DePriest Associates, Inc. Receipt For: Primary General Other (specify)	Occupation Consulta Aggregate	n nt • Year-to-Date ▼ 210.00	Contribution
S	FEC ID number of contributing federal political committee. Name of Employer DePriest Associates, Inc. Receipt For: Primary General	Occupation Consulta Aggregate	n nt • Year-to-Date ▼ 210.00	Contribution 1350.00

S	CHEDULE A (FEC Form 3X)		Llan apparato ashadiila(s)	FOR LINE NUMBER: PAGE 10 / 102
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
1 1	LIVIIZED RECEIF I 3		Detailed Summary Page	X 11a 11b 11c 12
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An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	Libertarian National Committee			
۹.	Full Name (Last, First, Middle Initial) John Doty			Date of Receipt
	Mailing Address 2238 E 21st St			01 06 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.178070
	Signal Hill	CA	90755-5925	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Doty Bros.Equip.	Occupation Estimator		Contribution
	Receipt For:		Year-to-Date ▼	1
	Primary General Other (specify) ▼		250.00	
 3.	Full Name (Last, First, Middle Initial) Joshua Dunn			Date of Receipt
	Mailing Address 9529 Orion Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.177913
	Burke	VA	22015-3242	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		450.00
	Name of Employer Cato Institute	Occupation Intern	ı	Contribution
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	450.00	
 C.	Full Name (Last, First, Middle Initial) Andy Favor			Date of Receipt
	Mailing Address 24121 Oleander Way			01 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.180038
	Laguna Niguel	CA	92677-7065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Information Requested	Occupation Information	n on Requested	Contribution
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			950.00
			<u> </u>	
T	OTAL This Period (last page this line number on	ly)	>	

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 102
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIVIIZED HEOLII 10		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Statem	nents may	not be sold or used by any perso	
or	for commercial purposes, other than using the nam	e and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	Libertarian National Committee			
Α.	Full Name (Last, First, Middle Initial) Clyde N Garman			Date of Receipt
	Mailing Address 1002 N Jerrie Ave Apt 7			0 1 1 3 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.179938
	-	AZ	85711-1163	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	None	ccupation	١	Contribution
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	005.00	1
	Other (specify) ▼		225.00	
В.	Full Name (Last, First, Middle Initial) William W Hall			Date of Receipt
	Mailing Address 11002 Stegman Forest Ct	NE		01 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.179078
	Rockford	MI	49341-8742	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Warner Nordrose & Judd LLP	ccupation	1	Contribution
			Year-to-Date ▼	
	Primary General	1 1		1
	Other (specify) ▼		545.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) Vince Hanke			Date of Receipt
	Mailing Address 6795 Sunbriar Dr			01 03 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.179038
	Cumming	GA	30040-6589	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	V. 9. I. Manadomont Co.	ccupation resident		Contribution
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	500.00	
	Other (specify) ▼	0 0	300.00	
s	UBTOTAL of Receipts This Page (optional)			1025.00
			•	
T	OTAL This Period (last page this line number only)		.	

SCHEDULE A (FEC Form 3X)	1		FOR LINE NUMBER: PAGE 12 / 102
	1	Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
Full Name (Last, First, Middle Initial) A. Gregory T Hertzsch			Date of Receipt
Mailing Address 120 Hills Dr			01 23 7 9 9 9
City	State	Zip Code	Transaction ID: SA11A1.179066
Clarksville	IN	47129-2539	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Vivid Impact, Inc.	Occupation Driver	n	Contribution
Receipt For:		e Year-to-Date ▼	
Primary General	7.99.094.0		7
Other (specify) ▼		310.00	
Full Name (Last, First, Middle Initial) 3. Brian Holtz	•		Date of Receipt
Mailing Address 23 Whitman Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.178838
San Carlos	CA	94070-4268	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer Sun Microsystems	Occupation SW Engi		Contribution
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	750.00	
Full Name (Last, First, Middle Initial) Gerald Jacknow	1		Date of Receipt
Mailing Address 4001 Lakeplace Ln			0 1 0 4 2 0 0 6
City	State	Zip Code	Transaction ID: SA11A1.177969
Austin	TX	78746-1638	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Clinical Pathology Assoc.	Occupation Physician		Contribution
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
SUBTOTAL of Receipts This Page (optional)			1550.00
TOTAL This Period (last page this line number	er only)	J	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 102
	EMIZED RECEIPTS		or each category of the	(check only one)
• •			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
$\sqrt{}$	NAME OF COMMITTEE (In Full)	<u></u>		
\rangle	Libertarian National Committee			
۹.	Full Name (Last, First, Middle Initial) David D. Jameson			Date of Receipt
	Mailing Address 8469 Fenton Rd			01 03 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.178752
	Grand Blanc	MI	48439-8968	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Self Employed	Occupation Real Esta		Contribution
	Receipt For:		e Year-to-Date ▼	\dashv
	Primary General	35. 28ato		1
	Other (specify) ▼		1000.00	
3.	Full Name (Last, First, Middle Initial) Jonathan Kahn			Date of Receipt
	Mailing Address 1108 Cheyenne Dr	01 30 / 9 2006		
	City	State	Zip Code	Transaction ID: SA11A1.177881
	Crown Point	IN	46307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		225.00
	Name of Employer Broadway Radiology	Occupation Physician		Contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		225.00	
 C.	Full Name (Last, First, Middle Initial) Jeremy Keil			Date of Receipt
	Mailing Address 5620 S Denis Ct			01 30 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.178900
	Hales Corners	WI	53130-2148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		359.00
	Name of Employer Thrivent Financial	Occupation Financial	n Associate	Contribution
	Receipt For:		Year-to-Date ▼	7
	Primary General		469.00	1
	Other (specify) ▼	0 0	409.00	
SI	UBTOTAL of Receipts This Page (optional)			1584.00
T	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the	(check only one)
	EMIZED RECEIP 19	Detailed Summary Page	X 11a 11b 11c 12 17 13 14 15 16 17
Ar or	ny information copied from such Reports and Statements ma for commercial purposes, other than using the name and ac	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) Libertarian National Committee		
Α.	Full Name (Last, First, Middle Initial) Erik C Kelley		Date of Receipt
	Mailing Address 6617 S Palm Dr.		0 1 1 3 2 0 0 6
	City State	Zip Code	Transaction ID: SA11A1.178360
	Tempe AZ FEC ID number of contributing federal political committee.	85283-3705	Amount of Each Receipt this Period 150.00
	<u>ca</u>	on Lab Tech te Year-to-Date ▼	Contribution
	Primary General Other (specify) ▼	250.00	
В.	Full Name (Last, First, Middle Initial) Larry Korn Mailing Address Unknown		Date of Receipt
	City State	Zip Code	0 1 1 8 2 0 0 6 Transaction ID: SA11A1.180146
	<u>Unknown</u>		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		500.00
	Name of Employer Occupation Requested Information Requested	on tion Requested	Contribution
	Receipt For: Primary General Other (specify) Aggrega	te Year-to-Date ▼ 500.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) Richard Mancini		Date of Receipt
	Mailing Address 719 Talon PI		01 04 2006
	City State Louisville KY	Zip Code 40223-5578	Transaction ID: SA11A1.178264 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	40220 3370	300.00
	Name of Employer Humania Inc. Occupative		Contribution
		te Year-to-Date ▼ 300.00	
s	UBTOTAL of Receipts This Page (optional)		950.00
H	OTAL This Period (last page this line number only)		

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 102
	EMIZED RECEIPTS	or each category of the	(check only one)
•••	LIVIIZED NEGEIF 13	Detailed Summary Page	X 11a 11b 11c 12
Δ	winformation and discount and Chatemants and		13 14 15 16 17
or	ly information copied from such Reports and Statements m for commercial purposes, other than using the name and a	ddress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
$ \rangle$	Libertarian National Committee		
	Full Name (Last, First, Middle Initial)		
Α.	Chuck E Moulton		Date of Receipt
	Mailing Address 1036 Hemlock Dr		01 30 2006
	City State	Zip Code	Transaction ID: SA11A1.179058
	Blue Bell PA	19422-1572	Amount of Each Receipt this Period
	FEO ID work or of contribution	10122 1072	
	FEC ID number of contributing federal political committee.		89.00
			Contribution
	Name of Employer Villanova Law School Occupati		Contribution
	Informa	tion Requested	
	Receipt For: Aggrega Primary General	te Year-to-Date ▼	
	Other (specify)	239.00	
		0 0 0 0 0 0 0	4
	Full Name (Last, First, Middle Initial)		
В.			Date of Receipt
	Mailing Address 3649 Burton Ln		M M / D D / Y Y Y Y
	0't-	7'- 0-4-	01 30 2006
	City State	Zip Code	Transaction ID: SA11A1.178363
	Lake Charles LA	70605-1025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		150.00
	rederal political committee.		Contribution
	Name of Employer Lake Charles Pilots, Inc. Occupati		Contribution
	Niver P		
		te Year-to-Date ▼	
	Primary General	250.00	
	Other (specify) ▼		J
_	Full Name (Last, First, Middle Initial)		
C.	Scott Olmsted		Date of Receipt
	Mailing Address 132 N. El Camino Real #336		M M / D D / Y Y Y Y
	-		01 31 2006
	City State	Zip Code	Transaction ID: SA11A1.180420
	Encinitas CA	92024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		225.00
	rederal political committee.		Contribution
Name of Employer Occupation Information Requested			Contribution
	Informa	tion Requested	
		te Year-to-Date ▼	_
	Primary General Other (specify) ▼	225.00	
	□ Other (specify) ♥	1 1 1 1 1 1 1	1
٩	UBTOTAL of Receipts This Page (optional)		464.00
\vdash			-
۱.	OTAL This Period (last page this line number only)	1	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 / 102					
	EMIZED RECEIPTS		or each category of the	(check only one)				
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar	ny information copied from such Reports and Statemer	nts may	not be sold or used by any perso					
or	for commercial purposes, other than using the name a	and add	dress of any political committee to	solicit contributions from such committee.				
\setminus	NAME OF COMMITTEE (In Full)							
$ \rangle$	Libertarian National Committee							
\angle				1				
Α.	Full Name (Last, First, Middle Initial) Steve Rothacker			Date of Receipt				
	Mailing Address 689 Kentwood Dr			M M / D D / Y Y Y Y				
				01 23 2006				
	,	tate	Zip Code	Transaction ID: SA11A1.180265				
	Rockwall T	X	75032-7505	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee			250.00				
	federal political committee.							
	Name of Employer Occ Information Requested Info	cupation	ı	Contribution				
			on Requested					
		gregate	Year-to-Date ▼					
	Primary General Other (specify)		250.00					
	Other (specify)		0 0 0 0 0 0 0					
_	Full Name (Last, First, Middle Initial)			+				
В.	Michael J Runnebohm			Date of Receipt				
	Mailing Address 2587 S 250 E			M M / D D / Y Y Y Y				
	City Si	tate	Zip Code	01 12 2006				
	Shelbyville IN		46176-9310	Transaction ID: SA11A1.178684				
	FFO ID combined to cold the time		40170-9510	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			500.00				
				Contribution				
	Runnehohm Construction I	cupation	n Owner					
			Year-to-Date V	-				
	Primary General	gregate	Teal to Date V					
	Other (specify) ▼		500.00					
				•				
_	Full Name (Last, First, Middle Initial)			Data of Danaint				
C.	Mary Ruwart Mailing Address 2455 Brathay Court			Date of Receipt				
	Walling Address 2455 Bratilay Court			01 30 2006				
	City St	tate	Zip Code	Transaction ID: SA11A1.178236				
	<u>Charlotte</u> N	С	28269	Amount of Each Receipt this Period				
	FEC ID number of contributing			270.00				
	federal political committee.			270.00				
	Name of Employer Healing Our World Books Out	cupation	1	Contribution				
	Healing Our World Books Ow	ner - 9	Self					
	Receipt For: Age	gregate	Year-to-Date ▼					
	Primary General		270.00					
	Other (specify) ▼		270.00					
٩	UBTOTAL of Receipts This Page (optional)			1020.00				
\vdash	Crita of Hoodpio Fino Fago (optional)			-				
Т	OTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/102
ITEMIZED RECEIPTS	or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Libertarian National Committee	7.	
Full Name (Last, First, Middle Initial) A. BetteRose Ryan		Date of Receipt
Mailing Address 4404 S Arden Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11A1.179870
Sioux Falls	SD 57103-5219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Retired	Occupation	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) B. R. Anthony Ryan		Date of Receipt
Mailing Address 4404 S Arden Ave		0 1 1 2 0 0 6
City	State Zip Code	Transaction ID: SA11A1.178044
Sioux Falls	SD 57103-5219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Denver Police Dept.	Occupation Law Enforcement	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Emily H. Salvette		Date of Receipt
Mailing Address 2016 Devonshire Rd		0 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11A1.179597
Ann Arbor	MI 48104-4058	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Information Requested	Occupation Information Requested	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number of	only)	

SC	HEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 18 / 102
			Use separate schedule(s) or each category of the	(check only one)
IIE	MIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Any or fo	information copied from such Reports and Sta or commercial purposes, other than using the n	itements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)			
ı (Libertarian National Committee			
	Full Name (Last, First, Middle Initial) Emily H. Salvette			Date of Receipt
N	Mailing Address 2016 Devonshire Rd			01 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.180108
4	Ann Arbor	MI	48104-4058	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		50.00
- 1	Name of Employer nformation Requested	Occupation	n on Requested	Contribution
F	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		550.00	
	Full Name (Last, First, Middle Initial) John R Seydel			Date of Receipt
N	Mailing Address 1027 Peachtree Battle A	ve NW		0 1 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
(City	State	Zip Code	Transaction ID: SA11A1.179982
	Atlanta	GA	30327-1317	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		500.00
1	Name of Employer None	Occupation Retired	1	Contribution
F	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial) Arin Sime			Date of Receipt
N	Mailing Address 1875 Clay Drive			0 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C	Dity	State	Zip Code	Transaction ID: SA11A1.178069
(Crozet	VA	22932	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		900.00
<u>1</u>	Name of Employer Donor Town Square	Occupation Owner - S		Contribution
F	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	900.00	
SU	BTOTAL of Receipts This Page (optional)			1450.00
			•	
то	TAL This Period (last page this line number or	nly)		

ССН	EDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 19/102
			Use separate schedule(s)	(check only one)	
ITEN	MIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b	11c 12
			Detailed Guillinary Fage	13 14	15 16 17
Any in	formation copied from such Reports and Stat	ements may	not be sold or used by any perso	on for the purpose of solic	citing contributions
or for o	commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from	such committee.
\ NA	ME OF COMMITTEE (In Full)				
) Lik	pertarian National Committee				
<u>/</u>					
	Name (Last, First, Middle Initial)			Date of Receipt	
_	orge Squyres iling Address PO Box 30697				/ V V V
ivia	iling Address PO Box 30697			01 17	2006
City	/	State	Zip Code	Transaction ID: S	
-	agstaff	ΑZ	86003-0697	Amount of Each R	
	*			7 tillount of Euch 11	· · · · · ·
	C ID number of contributing eral political committee.	C			500.00
	·			Contribution	
Nai	me of Employer ormation Requested	Occupation		Continuation	
	·		on Requested		
Re	ceipt For:	Aggregate	Year-to-Date ▼		
-	Primary General	· ·	500.00	1	
	Other (specify) ▼				
	I Nicoco (Local Pical Middle Letter)				
	l Name (Last, First, Middle Initial) rta Tollerup			Date of Receipt	
	iling Address PO Box 2295			M M / D D	/ Y Y Y Y Y
ivia	g / tod/ 555			01 7	
City	/	State	Zip Code	Transaction ID: S	A11A1.180127
Pro	escott	AZ	86302-2295	Amount of Each R	
EE.	C ID number of contributing				
	eral political committee.	C		11	500.00
				Contribution	
Nai Info	me of Employer ormation Requested	Occupation			
	·		on Requested		
Red	ceipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)	' '	500.00		
	Other (specify)	0 0		1	
Ful	I Name (Last, First, Middle Initial)				
	vin Anthony Torres			Date of Receipt	
Ma	iling Address 2020 Peach Orchard Dr	Apt 14		M M / D D	
				01 31	
City		State	Zip Code	Transaction ID: S	
<u> </u>	lls Church	VA	22043-2047	Amount of Each R	eceipt this Period
	C ID number of contributing	С			359.00
	eral political committee.				
Na	me of Employer	Occupation	1	Contribution	
N/A	A	Informati	on Requested		
Red	ceipt For:		Year-to-Date ▼		
	Primary General		070.00	1	
	Other (specify)		379.00		
					1359.00
SUBT	TOTAL of Receipts This Page (optional)				1959.00
TOTA	AL This Period (last page this line number on	ly))		

City

Receipt For:

City

Cumming

Receipt For:

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

PAGE 20 / 102 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Libertarian National Committee Full Name (Last, First, Middle Initial) Frank C Ullman Date of Receipt Mailing Address 1 Toms Point Ln Apt 02C 13 2006 State Zip Code Transaction ID: SA11A1.177920 Port Washington NY 11050-2128 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Contribution Name of Employer Cedar shopping centers INC Occupation Real Estate Developer Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cheslaw Wisniewski Date of Receipt Mailing Address 3940 Sinclair Shores Rd 23 2006 Transaction ID: SA11A1.180286 State Zip Code GA 30041-5415 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Contribution Name of Employer None Occupation Retired

1050.00

		1250.00
SUBTOTAL of Receipts This Page (optional)	>	1230.00
TOTAL This Period (last page this line number only)	•	17702.00

Aggregate Year-to-Date ▼

FOR LINE NUMBER: PAGE 21 / 102 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Libertarian National Committee Full Name (Last, First, Middle Initial) A. LIBERTARIAN REFORM PAC Date of Receipt Mailing Address PO BOX 1798 31 2006 City State Zip Code Transaction ID: SA11C.180639 **WEAVERVILLE** NC 28787 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C C00419341 federal political committee. Contribution Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	300.00
TOTAL This Period (last page this line number only)	•	300.00

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 22 / 102	\neg
		Use separate schedule(s) or each category of the	(check only one)	
ITEMIZED RECEIPTS		Detailed Summary Page	11a 11b 11c X 12	
				7
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
Libertarian National Committee				
Full Name (Last, First, Middle Initial) LPWA - Libertarian Party of Washington			Date of Receipt	
Mailing Address P.O. Box 7118			01 31 2006	
City	State	Zip Code	Transaction ID: SA12.180636	
Bellevue	WA	98008	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		1000.00	
Name of Employer	Occupation	1	Transfer	
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General	00 0		1	
Other (specify) ▼	0 0	1000.00		
Full Name (Last, First, Middle Initial) 3. LPWI - LIBERTARIAN PARTY OF WISCONSIN			Date of Receipt	
Mailing Address PO BOX 20815			0 1	
City	State	Zip Code	Transaction ID: SA12.180634	
GREENFIELD	WI	53220	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C C00	0387035	48.75	
Name of Employer	Occupation	1	Transfer	
Receipt For:	Aggregate	e Year-to-Date ▼		
Primary General		40.75	1	
Other (specify)	0 0	48.75		
Full Name (Last, First, Middle Initial) LPWI - LIBERTARIAN PARTY OF WISCONSIN			Date of Receipt	
Mailing Address PO BOX 20815			01 19 2006	
City	State	Zip Code	Transaction ID: SA12.180635	
GREENFIELD	WI	53220	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C C00	0387035	48.75	
Name of Employer	Occupation	١	Transfer	
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General		07.50	1	
Other (specify)		97.50		
SUBTOTAL of Receipts This Page (optional) .			1097.50]
<u> </u>		•	1097.50	1
TOTAL This Period (last page this line number	r only)		1097.30	J.

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 23 / 102
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one) 22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Libertarian National Committee	, , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial) A. American Express Card -42007			Transaction ID: SB21B.180508 Date of Disbursement
Mailing Address PO Box 1270			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & I \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ I & I & I & I \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ I & I & I & I & I \end{smallmatrix} \end{bmatrix} $
City Newark	State Zip Code NJ 07101-1270		Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Payment-See Attached Memo			2387.71
Candidate Name	_	Category/ Type	
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) 3. Xpedite - Premier Global			Transaction ID: SB21B.180508.0 Date of Disbursement
Mailing Address 1268 Paysphere Cir.			$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 0 & 0 \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & 0 & 0 \\ 2 & 0 & 0 & 6 & Y \end{bmatrix}$
City Chicago	State Zip Code IL 60674-1268		Amount of Each Disbursement this Period
Purpose of Disbursement Faxing Sevices Non Candidate Candidate Name		001 Category/ Type	2387.71
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼		[MEMO ITEM]
Full Name (Last, First, Middle Initial) - American National Insurance Co.			Transaction ID: SB21B.180524 Date of Disbursement
Mailing Address Attn: Lea Pollack P. O. Box 1830 - Pensi	on Dept.		01
City Galviston	State Zip Code TX 77550-1830		Amount of Each Disbursement this Period
Purpose of Disbursement 401k Plan Contributions Candidate Name		001	478.86
	sement For:	Category/ Type	
Senate President State: District:	Primary General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional	0		2866.57
TOTAL This Period (last page this line number on	,	<u> </u>	

	CHEDOLE B (I LOI OIII 3X)	Use seperate schedule(s)		OR LINE		:H:			PAG	= 24/	102
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		K		22 28a		23 28b	$\mathbf{\square}$	24 28c	25 29	26 30b
	y Information copied from such Reports and State for commercial purposes, other than using the nan											ns
Or	NAME OF COMMITTEE (In Full)	le and address of any politica	II COITI	1111	illee to so	iicit conti	ribui	ions in	om s	uch con	imilitee	
$ \rangle$	Libertarian National Committee											
_	Full Name (Last, First, Middle Initial)					Trans	sact	ion ID	: SB	21B.18	0532	
Α.	Anthem Blue Cross Blue Shield							isburs			V	V
	Mailing Address PO Box 85101					0 1		′ _ ຶ 3	3 1	Ĺ.	ž 0 ŏ	6
	City Richmond	State Zip Code VA 23285-5101				Amou	ınt c	f Each	Disk	ourseme	ent this	Period
	Purpose of Disbursement			U	-						558.	75
	Employee Medical		-	Ò(
	Candidate Name				egory/ pe							
		ement For:										
	Senate President	Primary General Other (specify)										
	State: District:	(-), \										
_	Full Name (Last, First, Middle Initial)					Trans	sact	ion ID:	: SB	21B.18	0536	
B.	BentleyForbes Watergate LLC						_	isburs		nt		
	Mailing Address 1578 Paysphere Circle					0 1	М	/ DC	1	/ Y	žoŏ	6 ^Y
	City Chicago	State Zip Code IL 60674				Amou	ınt c	f Each	Disk	ourseme	ent this	Period
	Purpose of Disbursement Office Rent			00	11	L					8959.	77
	Candidate Name		Ca	ate	egory/ pe							
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify) ▼	•									
	State: District:											
C.	Full Name (Last, First, Middle Initial) Blackbaud							ion ID:		21B.18 nt	0545	
	Mailing Address P.O. Box 930256					0 ^M 1	М	/ D 1	Ō	/ Y	200	6 ^Y
	City Atlanta	State Zip Code GA 31193-0256	<u> </u>			Amou	ınt c	f Each	Disk	ourseme	ent this	Period
	Purpose of Disbursement Software Purchase 001				01	L.					7915.	65
	Candidate Name				egory/ pe							
	Senate President	ement For: Primary General Other (specify)	•									
	State: District:											
s	UBTOTAL of Disbursements This Page (optional)				<u> </u>					1	7434.	17
Т	OTAL This Period (last page this line number only	·)			•							

SCHEDULE B (FEC Form 3X)		Use seperate schedule(s)		FOR LINE	E NUMBER: PAGE 25 / 102 ly one)					
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27	22 23 2 28a 28b	24 25 28c 29	26 30b			
	y Information copied from such Reports and State for commercial purposes, other than using the nar						s			
\vdash	NAME OF COMMITTEE (In Full)									
$ \rangle$	Libertarian National Committee									
Α.	Full Name (Last, First, Middle Initial) CANANWILL, INC				Transaction ID: S Date of Disbursem	nent				
	Mailing Address PO Box # 19639				01 31	2006	S ^Y			
	City Newark	State Zip Code NJ 07195-0639			Amount of Each D	isbursement this F	Period			
	Purpose of Disbursement Insurance		Γ	001		758.3	36			
	Candidate Name		O	ategory/ Type						
	Senate President	sement For: Primary General Other (specify) ▼								
	State: District:									
В.	Full Name (Last, First, Middle Initial) J. Daniel Cloud				Transaction ID: S Date of Disbursem	nent	_			
	Mailing Address 1013 Price Ave				01 17	Ž Ž O Ŏ 6	S ^Y			
	City Columbia	State Zip Code SC 29201			Amount of Each D					
	Purpose of Disbursement			20.4		1750.0	00			
	Party Newspaper Writing - Editing Servic Candidate Name		C	004 ategory/ Type						
	Office Sought: Senate President State: Disburs	sement For: Primary General Other (specify) ▼								
С.	Full Name (Last, First, Middle Initial) CNA1 - CNA Insurance				Transaction ID: S Date of Disbursem					
	Mailing Address PO Box 382033				01 / 31	^Y 2006	S			
	City Pittsburgh	State Zip Code PA 15250-8033			Amount of Each D	isbursement this F	Period			
	Purpose of Disbursement Gen Liability Insrance			001	L	238.2	20			
	Candidate Name		C	ategory/ Type						
	Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼								
[UBTOTAL of Disbursements This Page (optional)					2746.5	56			
	OTAL This Period (last page this line number only			·····						

	CHEDULE B (FEC Form 3X)	Use sep	erate schedule(s)			OR LINE		R:			Р	AGE	26 /	102	_
IT _	EMIZED DISBURSEMENTS		category of the Summary Page		X	21b 27	22 28a		23 28b		24 280	<u> </u>	25 29	\longrightarrow	26 80b
	y Information copied from such Reports and State for commercial purposes, other than using the nar													s	
\vdash	NAME OF COMMITTEE (In Full)														
$ \rangle$	Libertarian National Committee														
Α.	Full Name (Last, First, Middle Initial) CNA Insurance						Trans Date			_		3.180)547		
	Mailing Address PO Box 382033						0 ^M 1	М	/ [3 1	′ [ž	o ŏ e	Y	
	City Pittsburgh	State PA	Zip Code 15250				Amou	ınt o	f Ead	ch Di	isburs	emen	nt this F		_
	Purpose of Disbursement General Liability Insurance			Г	00	1	L			_	-		953.	30	
	Candidate Name			С	Categ Typ										
	Senate President	Primary Other (spe	General ecify)												
	State: District:														_
В.	Full Name (Last, First, Middle Initial) Shane Cory						Trans Date	of D	isbuı	sem	ent			_	
	Mailing Address 5 Burwell Place						0 ^M 1	М	/ [11		ž	0 0 6	5	
	City Stafford	State VA	Zip Code 22554				Amou	ınt o	f Ead	ch Di	isburs		nt this F		7
	Purpose of Disbursement Employee Net Pay Candidate Name			C	00 Cateo	gory/	L.						2091.	31	J
	Office Sought: House Disburs	sement For: Primary Other (spe	General ecify) ▼												
С.	Full Name (Last, First, Middle Initial) Shane Cory						Trans Date					3.180)467		_
	Mailing Address 5 Burwell Place							М		25		Ý Ž	ÓÓ	Y	
	City Stafford	State VA	Zip Code 22554				Amou	ınt o	f Ead	ch Di	isburs	emen	nt this F	Period	_
	Purpose of Disbursement Employee Net Pay				00	1						2	2091.	30	
	Candidate Name			С	Categ Typ										
	Office Sought: House Senate President State: Disburs	Primary Other (spe	General ecify) ▼												
s	UBTOTAL of Disbursements This Page (optional))				•						5	137.4	11	1
	OTAL This Period (last page this line number only								-					-	i

ITEMIZED			erate schedule(s)	, ,	(check or	E NUMBE					27 / 1	U <u>L</u>
	DISBURSEMENTS	for each	category of the Summary Page	١.	X 21b 27	22 28a	\blacksquare	23 28b	24 28		25 29	26 30b
	copied from such Reports and Stater al purposes, other than using the nam											i
	OMMITTEE (In Full)											
Libertarian	National Committee											
Full Name (L A. Matthew T	ast, First, Middle Initial) Dailey					Date	of Dis	burse	ment	B.1804		
Mailing Addr	ess 3515 Washington Blvd #	# 511				0 ^M 1	M /	^D 1	1 /	Ý Ž () ŏ 6	Y
City Arlington		State VA	Zip Code 22201			Amou	ınt of l	Each	Disbur	rsement	this P	eriod
	Disbursement et Pay				001	T L.	_			8	397.6	1
Candidate N	ame			ı	tegory/ Γype							
Office Sough	Senate President	ement For: Primary Other (sp	General ecify) ▼									
State:	District:											
B. Matthew T	ast, First, Middle Initial) Dailey					Date	of Dis		ment	B.1804		_
Mailing Addr	ess 3515 Washington Blvd #	# 511				0 ^M 1	M /	Ý Ž (ò 6	Y		
City Arlington		State VA	Zip Code 22201			Amou	int of I	Each	Disbur	rsement	this P	eriod
Purpose of Employee No	Disbursement Pay				001		_			5	928.8	2
Candidate N	<u> </u>			Ca	tegory/ Γype							
Office Sough	nt: House Disburs Senate President District:	ement For: Primary Other (sp	General ecify) ▼	I								
Full Name (L	ast, First, Middle Initial) of Tax & Revenue						actio of Dis			B.1804	99	
Mailing Addr		E 6th Flr				0 ^M 1	M /	^D 1	0 /	ÝŽ	o ŏ 6	Y
City Washingto	n	State DC	Zip Code 20002			Amou	ınt of I	Each	Disbur	rsement	this P	eriod
Purpose of DC - Withho	Disbursement Iding				001	T L.				2	233.0	0
Candidate N	ame				tegory/ Type							
Office Sough	nt: House Disburs Senate President District:	ement For: Primary Other (sp	General ecify) ▼									
										20	59.4	3
	Disbursements This Page (optional)				··· •		-	•	-		J J 1 T	=

SCHEDOLL B (I LOI OIII 3X)	Use seperate schedule(s)			: NUMBE ly one)	:K:		_ P	AGE	28 / 1	02	_
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	21b 27	22 28a	\square	23 28b	24 280	П	25 29	—	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full)	e and address of any political co	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	io 80	JIICIL COITL	ווטענונ	טוו פווע	iii Sucii	COIII	iiillee		
Libertarian National Committee											
Full Name (Last, First, Middle Initial)				Trans	sactio	on ID:	SB21E	3.180	483		
DC Office of Tax & Revenue					of Dis	sburse		V • V	V	V	
Mailing Address 941 North Capitol St, NE	6th Flr			0 ^M 1	, ivi	2	^D /	<u>'</u> 2	0 0 6		
City	State Zip Code			Amou	ınt of	Each	Disburs	emen	t this P	eriod	
Washington Purpose of Disbursement	DC 20002								124.9	8	1
DC - Unemployment Company		001			-	-		-		_	
Candidate Name		Catego Type	-								
Office Sought: House Disburs	ement For: Primary General										
President	Other (specify)										
State: District:											
Full Name (Last, First, Middle Initial)							SB21E	3.180	484		
3. DC Office of Tax & Revenue				Date M	of Dis	sburse		V * V	· V	V	
Mailing Address 941 North Capitol St, NE	6th Flr			0 1	Mi /	2	4	Ż	0 Ó 6		
City Washington	State Zip Code DC 20002			Amou	ınt of	Each	Disburs	emen			7
Purpose of Disbursement DC - Withholding	lΓ	001		L.	-			-	264.0	00	1
Candidate Name		Catego Type	ry/								
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)										
Full Name (Last, First, Middle Initial)				Trans	sactio	on ID:	SB21E	180	550		
De Lage Landen Financial						sburse					
Mailing Address PO Box 41601				0 ^M 1	M /	1	7 /	ž	0 Ď 6	Y	
City Philadelphia	State Zip Code PA 19101-1601			Amou	ınt of	Each	Disburs	emen	t this P	eriod	
Purpose of Disbursement Equipment Lease	177 10101 1001	001		L					541.5	55	
Candidate Name		001 Catego Type	ry/								
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)										
SUBTOTAL of Disbursements This Page (optional)			•		•				930.5	3]
TOTAL This Period (last page this line number only	1						-				7
I THE THIS I SHOW (last page this line number only		•••••			_					_	4

	CHEDULE B (FEC Form 3X)	Use sep	erate schedule(s)			OR LINE	-	R:			P	AGE	29 / 1	02
IT	EMIZED DISBURSEMENTS		category of the Summary Page		X		22 28a		23 28b		24 28c		25 29	26 30
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam													S
\vdash	NAME OF COMMITTEE (In Full)													
$ \rangle$	Libertarian National Committee													
Α.	Full Name (Last, First, Middle Initial) Susan M Dickson						Trans Date			_		.180	459	
	Mailing Address 2206 N. Pickett St						0 ^M 1	М	/ D	1 1	/	ž	0 ŏ 6	Y
	City Alexandria	State VA	Zip Code 22304				Amou	ınt o	f Eac	h Di	sburse	ement	this F	Period
	Purpose of Disbursement Employee Net Pay				00	1			•				876.4	19
	Candidate Name			С	Cateo Typ	gory/ be								
	Senate President	ement For: Primary Other (spe	General ecify) ▼											
	State: District:													
В.	Full Name (Last, First, Middle Initial) Susan M Dickson						Date	of D	isbur	sem				
	Mailing Address 2206 N. Pickett St						0 ^M 1	М	/ D	25]	ž	0 ŏ 6	Y
	City Alexandria	State VA	Zip Code 22304				Amou	ınt o	f Eac	h Di	sburse			
	Purpose of Disbursement Employee Net Pay Candidate Name			C	00 Cateo	gory/			•	•			828.8	00
	Office Sought: Senate President State: Disburse	ement For: Primary Other (spe	General ecify) ▼											
C .	Full Name (Last, First, Middle Initial) Gladis A Douwopka						Trans Date					.180	452	
	Mailing Address 311 Dawsons Ave, Apt #	[‡] 6					0 ^M 1	М	/ D	1 1	/	Ý Ž	0 ŏ 6	Y
	City Rockville	State MD	Zip Code 20850				Amou	ınt o	f Eac	h Di	sburse			
	Purpose of Disbursement Employee Net Pay				00		L.		-		•		529.1	12
	Candidate Name			С	Cateo Typ	gory/ pe								
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼											
s	UBTOTAL of Disbursements This Page (optional)					•		•	_	•		22	234.4	19
	OTAL This Period (last page this line number only)			-									-	

	CHEDULE B (FEC FOIII 3X)	Use seperate schedul		FOR LINE (check only			P	AGE 30 /	102
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pa	ıge	X 21b 27	22 28a	23 28b	24 28c	25 29	26 30t
	y Information copied from such Reports and State for commercial purposes, other than using the nan								
\sum_{i}	NAME OF COMMITTEE (In Full) Libertarian National Committee	to data dada ooo or day pon	illour oon		ion contino	21.01.0 110	an odon		<u> </u>
Α.	Full Name (Last, First, Middle Initial) Gladis A Douwopka Mailing Address 311 Dawsons Ave. Apt	40				Disburse	_	.180453 Y 2 0 0	6 Y
	Mailing Address 311 Dawsons Ave, Apt	7 0			<u> </u>				
	City Rockville	State Zip Code MD 20850			Amount	of Each	Disburse	ement this	Period
	Purpose of Disbursement Employee Net Pay Candidate Name			001 ategory/				678	.61
	Office Sought: House Senate President State: District:	sement For: Primary Gene Other (specify)	eral	Туре					
В.	Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit					tion ID: Disburse	_	.180491	
	Mailing Address PO Box 970030				0 1 M	/ 1	0 /	žoŏ	6 ^Y
	City St. Louis	State Zip Code MO 63197-00	030		Amount	of Each	Disburse	ement this	• • •
	Purpose of Disbursement Federal Withholding Candidate Name			001			•	873	.00
	Candidate Name			ategory/ Type					
	Office Sought: House Disburs	sement For: Primary Gene Other (specify) ▼	eral						
C.	Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit					tion ID: Disburse		.180492	
	Mailing Address PO Box 970030				0 1	/ D	0 /	žoŏ	6 ^Y
	City St. Louis	State Zip Code MO 63197-00	030		Amount	of Each	Disburse	ement this	Period
	Purpose of Disbursement Social Security Company			001				668	.72
	Candidate Name		C	ategory/ Type					
	Senate President	sement For: Primary Gene Other (specify)	eral						
	State: District:							0000	00
s	UBTOTAL of Disbursements This Page (optional)	·		<u> </u>				2220	.33
Т	OTAL This Period (last page this line number only	<i>ı</i>)		•					

	CHEDULE B (FEC Form 3X)		erate schedule(s)			OR LINE	NUMBE	R:			P	AGE	31 / 1	02	_
1T 	EMIZED DISBURSEMENTS		category of the Summary Page		X		22 28a		23 28b	E	24 28c		25 29	$\boldsymbol{\sqsubseteq}$	26 30b
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam													S	
\vdash	NAME OF COMMITTEE (In Full)														
$ \rangle$	Libertarian National Committee														
Α.	Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit						Trans Date			_	B21B ent	.180	493		
	Mailing Address PO Box 970030						0 ^M 1	М	/ [10	/	Ý Ž	0 ŏ 6	Y	
	City St. Louis	State MO	Zip Code 63197-0030				Amou	ınt o	f Ead	ch Di	sburse		-		_ _
	Purpose of Disbursement Social Security Employee			Г	00)1	L.		_				668.7	72	_
	Candidate Name			С	Cate Typ	gory/ oe									
	Senate President	ement For: Primary Other (spe	General ecify) ▼												
	State: District: Full Name (Last, First, Middle Initial)						-			.	D04 D	100	10.1		
В.	Financial Agent Federal Tax Deposit						Date			sem				Υ	
	Mailing Address PO Box 970030						0 1		L	10	J L	2	οŏε		
	City St. Louis	State MO	Zip Code 63197-0030				Amou	ınt o	f Ead	ch Di	sburse				7
	Purpose of Disbursement Medicare Company Candidate Name			C	00 Cate Typ	gory/	L.				•	•	156.4	+0	_
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ♥												
C.	Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit						Trans Date				B21B ent	.180	495		
	Mailing Address PO Box 970030						0 ^M 1	М	/ [10	/	Ý Ž	o ŏ 6	Y	
	City St. Louis	State MO	Zip Code 63197-0030				Amou	ınt o	f Ead	h Di	sburse				_
	Purpose of Disbursement Medicare Employee				00		L.		_				156.4	10	_
	Candidate Name			С	Cate Typ	gory/ oe									
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ♥												
s	UBTOTAL of Disbursements This Page (optional)					>			•				981.5	52	1
	OTAL This Period (last page this line number only)										-			_	ī

SCHEDULE B (FEC Form 3X)	Use seperate sc		FOR LINE			PAG	E 32/	102
ITEMIZED DISBURSEMENTS	for each category Detailed Summa	of the	X 21b 27	22 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na								S
NAME OF COMMITTEE (In Full) Libertarian National Committee		· ·						
Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit				Date of [tion ID: SE			
Mailing Address PO Box 970030				0 1	10	/ L	ž 0 ŏ 6	5
City St. Louis	State Zip Co MO 6319	ode 97-0030		Amount	of Each Dis	bursem	ent this F	
Purpose of Disbursement Federal Unemployment Candidate Name		C	001 ategory/				00.2	
Office Sought: House Disbu Senate President State: District:	sement For: Primary Other (specify)	General	Туре					
Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit				Date of [tion ID: SE Disburseme		30476 2 0 0 6	Y
Mailing Address PO Box 970030				0 1	2 4	<u> </u>	2006	5
City St. Louis	State Zip Co MO 6319	ode 97-0030		Amount	of Each Dis	bursem		
Purpose of Disbursement Federal Withholding Candidate Name			001 category/ Type				948.0	00
Office Sought: House Disbu	sement For: Primary Other (specify)	General						
Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit					tion ID: SE Disburseme		30477	
Mailing Address PO Box 970030				0 1	24	/ Y	ž 0 ŏ 6	S Y
City St. Louis	State Zip Co MO 6319	ode 97-0030		Amount	of Each Dis	bursem		-
Purpose of Disbursement Social Security Company Candidate Name			001 Category/				713.6	04
Office Sought: Senate President State: District:	sement For: Primary Other (specify)	General	Туре					
SUBTOTAL of Disbursements This Page (optional	l)		▶				1747.9	93
TOTAL This Period (last page this line number on								

SCHEDULE B (FEC Form 3X)	Use seperat	e schedule(s)	FOR LINE (check only			PAGE	33 / 10)2
ITEMIZED DISBURSEMENTS	for each cat	egory of the Ómmary Page	X 21b 27	22 28a		24 28c	25 29	26 30b
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full) Libertarian National Committee								
Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit				Date of [tion ID: SB2 Disbursement	:		
Mailing Address PO Box 970030				0 1	^D 24	, ž	0 0 6	
City St. Louis		ip Code 33197-0030		Amount	of Each Disb		this Pe	-
Purpose of Disbursement Social Security Employee Candidate Name			001 Category/				7 10.0	
Office Sought: House Disbu Senate President State: District:	rsement For: Primary Other (specify	General y) ▼	Туре					
Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit				Date of [tion ID: SB2		179 0 0 6 °	7
Mailing Address PO Box 970030				0 1	24			
City St. Louis		ip Code 3197-0030		Amount	of Each Disb		this Pe 166.89	-
Purpose of Disbursement Medicare Company Candidate Name		C	001 Category/ Type				100.08	,
Office Sought: House Disbu Senate President State: District:	rsement For: Primary Other (specify	General y) ▼						
Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit				Date of I	tion ID: SB2 Disbursement		180	
Mailing Address PO Box 970030				01	24	y y 2	0 Ó 6 Ĭ	
City St. Louis	State Z MO 6	ip Code 33197-0030		Amount	of Each Disb			-
Purpose of Disbursement Medicare Employee Candidate Name			001 Category/			0 0	166.89	,
Office Sought: House Disbu Senate President State: District:	rsement For: Primary Other (specify	General	Туре					
SUBTOTAL of Disbursements This Page (optional	al)					10)47.42	2
TOTAL This Period (last page this line number or	lv)						•	

	CHEDULE B (FEC Form 3X)	Use sep	erate schedule(s)			R LINE	NUMBE	R:			Р	AGE	34 / 1	02	_
11	EMIZED DISBURSEMENTS		category of the Summary Page		$\dot{\mathbf{X}}$	21b [27 [22 28a		23 28b	, E	24 28c		25 29	\longrightarrow	26 30b
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam													S	
\vdash	NAME OF COMMITTEE (In Full)		,												
$ \rangle$	Libertarian National Committee														
Α.	Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit						Trans Date			_		3.180	481		
	Mailing Address PO Box 970030						0 ^M 1	М	/ [24	1	Ý Ž	o ŏ 6	Y	
	City St. Louis	State MO	Zip Code 63197-0030				Amou	ınt o	f Ead	ch Di	sburs	ement	-	-	_ 7
	Purpose of Disbursement Federal Unemployment			Γ	001							_	92.0	08	_
	Candidate Name			С	atego Type	γ/									
	Senate President	ement For: Primary Other (spe	General ecify) ▼												
	State: District: Full Name (Last, First, Middle Initial)														_
В.	Joe Ragan's						Trans Date	of D	isbuı	sem	ent			V	
	Mailing Address PO Box 125						0 1	М	/ [17]	ž	o ŏ 6	Y	
	City Soringfield	State VA	Zip Code 22150-0125				Amou	ınt o	f Ead	ch Di	sburs	ement	this F	Period	_
	Purpose of Disbursement Office Supplies Candidate Name			C	001 atego	ry/							327.	19	_
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼		Type										
С.	Full Name (Last, First, Middle Initial) Robert S Kraus						Trans Date					3.180	464		
	Mailing Address 106 Roberts Ln #100						0 ^M 1	М	/ [11	′ [ž	o ŏ e	Y	
	City Alexandria	State VA	Zip Code 22314				Amou	ınt o	f Ead	ch Di	sburs	ement	this F	Period	_
	Purpose of Disbursement Employee Net Pay				001							. 1	015.	51	_
	Candidate Name			С	atego Type	ry/									
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼												
	UBTOTAL of Disbursements This Page (optional)					•			•	_	• •	14	434.7	78	7
	OTAL This Period (last page this line number only						Ħ	•	-	0	•	•		•	i

	CHEDULE B (FEC Form 3X)		erate schedule(s)			OR LINE		R:			Р	AGE	35 /	102
IT 	EMIZED DISBURSEMENTS		category of the Summary Page		X		22 28a		23 28b	<u>,</u> [24 280	<u> </u>	25 29	26 30
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam													s
\vdash	NAME OF COMMITTEE (In Full)													
$ \rangle$	Libertarian National Committee													
Α.	Full Name (Last, First, Middle Initial) Robert S Kraus						Trans Date		isbuı	sem	ent	3.180)465	
	Mailing Address 106 Roberts Ln #100						0 ^M 1	М	/ [25] ′ [ž	0 0 6	S ^Y
	City Alexandria	State VA	Zip Code 22314				Amou	ınt o	f Ead	ch D	sburs	emer	nt this F	Period
	Purpose of Disbursement Employee Net Pay				00	1							999.	52
	Candidate Name			С	Cateo Typ	gory/ pe								
	Senate President	ement For: Primary Other (spe	General ecify) ▼											
	State: District:													
В.	Full Name (Last, First, Middle Initial) John V LaBeaume						Trans Date	of D	isbuı	sem	ent			V
	Mailing Address 1906 R St NW #12						0 ^M 1	М	/ [11		` 2	0 0 6	S [*]
	City Washington	State DC	Zip Code 20009				Amou	ınt o	f Ead	ch D	sburs	emer	nt this f	
	Purpose of Disbursement Employee Net Pay Candidate Name			C	00 Cateo	gory/	L.		•	•			728.	62
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ▼		- 71	-								
C.	Full Name (Last, First, Middle Initial) John V LaBeaume						Trans Date					3.180)460	
	Mailing Address 1906 R St NW #12						0 ^M 1	М	/ [25	′ [Ý Ž	0 0 6	S
	City Washington	State DC	Zip Code 20009				Amou	ınt o	f Ead	ch D	sburs	emen	nt this f	Period
	Purpose of Disbursement Employee Net Pay				00	1					-		908.	87
	Candidate Name			C	Cateo Typ	gory/ pe								
	Office Sought: Senate President State: Disburse Disburse	ement For: Primary Other (spe	General ▼											
S	UBTOTAL of Disbursements This Page (optional)					•						2	637.0	01
	OTAL This Period (last page this line number only)							-	_	-		-		

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NAME OF COMMITTEE (In Full)	e and address of any political co	אוווווונ	iee io s	Olicit Corit	HDUI	0115 110	III SUCII	COITIII	iiiiee	
Libertarian National Committee										
Full Name (Last, First, Middle Initial)							SB21B	.180	522	
MAMSI - UnitedHealth (WFG)					of Di	sburse		Y Y	Y	Y
Mailing Address PO Box 42924				0 1		3	^D /	2	0 Ď 6	
City Philadelphia	State Zip Code PA 19101-2924			Amou	unt of	Each	Disburs	emen	t this P	eriod
Purpose of Disbursement	FA 19101-2924		_	+ []				·	241.7	6
Employee Health & Dental		00	1							
Candidate Name		Categ Typ	-							
Office Sought: House Disburse Senate	ement For: Primary General Ge									
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial)							SB21B	.180	526	
Merchant Services				Date	of Di	sburse	D /	ΥΥ	Y	Υ
Mailing Address 890 Mountain Ave				0 1		3	1	2	0 Ď 6	
City New Providence	State Zip Code NJ 07974			Amou	unt of	Each	Disburs			
Purpose of Disbursement	Г		,					1	169.0	14
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		Тур	-							
	ement For:									
Senate President	Primary General Other (specify)									
State: District:	(1 3 / V									
Full Name (Last, First, Middle Initial)						-	SB21B	.180	457	
Samuel P New				Date M	of Di	sburse	ment	Y Y	Y	Y
Mailing Address 1500 Massachusetts Ave Apt 842	e, NW			0 1		1	1	2	0 Ó 6	
City Washington	State Zip Code DC 20005			Amou	unt of	Each	Disburs	emen	t this P	eriod
Purpose of Disbursement Employee Net Pay		00	1		_			_	940.3	2
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	ement For:			1						
Senate	Primary General									
State: District:	Other (specify)									
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	y Information copied from such Reports and Staten for commercial purposes, other than using the nam													;
abla	NAME OF COMMITTEE (In Full)													
$ \rangle$	Libertarian National Committee													
Α.	Full Name (Last, First, Middle Initial) Samuel P New								sburs	seme		1804	63	
	Mailing Address 1500 Massachusetts Ave Apt 842	e, NW				0	1	1 /	D	25		ž0) Ó 6	Y
	City Washington	State DC	Zip Code 20005			An	nour	nt of	Eac	h Dis	sburse	ment t	his P	eriod
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В.	Full Name (Last, First, Middle Initial) Samuel P New					Da	te o	f Dis	sburs	seme		1804		_
	Mailing Address 1500 Massachusetts Ave Apt 842	e, NW				0	1	/	D	3 1	/ [ž0) Ó 6	Y
	City Washington	State DC	Zip Code 20005			An	nour	nt of	Eac	h Dis	sburse	ment t		
	Purpose of Disbursement Travel Reimbursement See Attached Memo			Г	001		_	_	_			6	35.1	5
	Candidate Name			С	ategory/ Type									
	Office Sought: House Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼											
C.	Full Name (Last, First, Middle Initial)								on IE			1804	71.0	
	Mailing Address 2435 S 47th St					O _V	1	/	D	3 ^D	/	ž 0	ó 6	Y
	City Pheonix	State AZ	Zip Code 85034			An	nour	nt of	Eac	h Dis	sburse	ment t	his P	eriod
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	Candidate Name			С	ategory/ Type	TRA E	=844	.	ГЕМ	1				
	Office Sought: Senate President State: Disburse	ement For: Primary Other (spe	General ecify)			LIVIT	_1VI		I CIVI	J				
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	y Information copied from such Reports and State											ns
or	for commercial purposes, other than using the nar	ne and address of any politica	l com	ımı	ittee to so	licit conti	ribut	ions fr	om su	ich com	mittee	
$ \rangle$	NAME OF COMMITTEE (In Full) Libertarian National Committee											
V_{\perp}	Libertarian National Committee											
Α.	Full Name (Last, First, Middle Initial)							-		1B.18	0470	
Λ.	David W. Owens							isburs			V V	Y
	Mailing Address 250 Mercer Mill Rd.					0 1		1	8		ž 0 Ď (6
	City	State Zip Code				Amou	ınt c	f Each	Disb	urseme	nt this	Period
	Landenberg Purpose of Disbursement	PA 19350									7500.	00
	Non Candidate Party Related Promo Video			00	03		-					
	Candidate Name				gory/ pe							
	Office Sought: Senate President State: Disburs Senate	ement For: Primary General Other (specify)										
	Full Name (Last, First, Middle Initial)					-		· ID	000	4D 40	0510	
В.	Postmaster					Date		isburs	ement			V
	Mailing Address US Post Office Waterga 2500 virginia Ave NW	te				0 [™] 1	IVI		7		žoó	6
	City Washington	State Zip Code DC 20037				Amou	ınt c	f Each	Disb	urseme		
	Purpose of Disbursement Non Candidate Postage Mailing			00	11						500.	00
	Candidate Name		Ca	ate	gory/							
	Office Sought: House Disburs	ement For: Primary General Other (specify)										
	Full Name (Last, First, Middle Initial)					Trans	· a o t	ion ID	. 000	1B.18		
C.	Postmaster - Walton Press					Date		isburs	ement			Y
	Mailing Address Walton Press 402 Mavfield Dr					0 1		1	7		žoó	6
	City Monroe	State Zip Code GA 30655				Amou	ınt c	f Each	Disb	urseme		
	Purpose of Disbursement Non Candidate Postage Mailing			00	01		-	_			2566.	88
	Candidate Name		Ca	ate	gory/ pe							
	Senate President	ement For: Primary General Other (specify)										
	State: District:											
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam													S
\vdash	NAME OF COMMITTEE (In Full)													
$ \rangle$	Libertarian National Committee													
Α.	Full Name (Last, First, Middle Initial) Prospect Tech						Trans Date			_	B21B ent	3.180	555	
	Mailing Address 3246 Prospect St NW						0 ^M 1	М	/ D	0 6	′	Ý Ž	0 ŏ 6	Y
	City Washington	State DC	Zip Code 20007				Amou	ınt o	f Eac	h Di	sburse	ement	this F	Period
	Purpose of Disbursement Network and Telephone Systems Maintenanc			Г	00	1	L.	-	-				749.0	00
	Candidate Name			С	Cateo Typ	gory/ oe								
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General											
	State: District:													
В.	Full Name (Last, First, Middle Initial) Prospect Tech						Trans Date	of D	isbur	seme		3.180	530	
	Mailing Address 3246 Prospect St NW						0 ^M 1	М	/ D	20	/	ž	0 ŏ 6	Y
	City Washington	State DC	Zip Code 20007				Amou	ınt o	f Eac	h Di	sburs		this F	
	Purpose of Disbursement Network and Phone Systems Maint. Candidate Name			C	00 Cateo	gory/	L.				•	2	500.0	00
	Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General ▼											
С.	Full Name (Last, First, Middle Initial) QuickBooks Payroll Service						Trans Date					3.1804	490	
	Mailing Address PO Box 30015						0 ^M 1	М	/ D	1 0	/	ž	o ŏ 6	Y
	City Reno	State NV	Zip Code 89520-3015				Amou	ınt o	f Eac	h Di	sburse	ement	this F	Period
	Purpose of Disbursement Payroll Processing Fee				00	1	L.		-			•	4.6	66
	Candidate Name			С	Cate Typ	gory/ pe								
	Office Sought: Senate President State: Disburs Disburs District:	ement For: Primary Other (spe	General ▼											
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Libertarian National Committee									
Full Name (Last, First, Middle Initial)				Trans	action I	D : SB21E	3.1804	97	
QuickBooks Payroll Service						rsement	V V	V - V	
Mailing Address PO Box 30015				0 ^M 1		10 /	20) Ď 6 Ť	
City Reno	State Zip Code NV 89520-3015			Amou	nt of Ea	ch Disburs	sement t	this Pe	riod
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President	Other (specify)								
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Full Name (Last, First, Middle Initial)						D : SB21E	3.1804	73	
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Senate President	Primary General Other (specify) ▼								
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Full Name (Last, First, Middle Initial)				Trans	action I	D : SB21	3.1804	74	
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Mailing Address PO Box 30015				0 1	M / L	24	20) 0 6	
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Senate President	Primary General Other (specify) ▼								
State: District:									
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IT	EMIZED DISBURSEMENTS		ategory of the ummary Page		X	_		22 28a		23 28b		24 28c		25 29	26 30k
	y Information copied from such Reports and State														ıs
Or	for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	ne and address	or any political	COIII	11111	ilee io	SOIICI	t Contr	ibut	ions ir	OIII S	Sucri C	OHIII	iiilee	
$ \rangle$	Libertarian National Committee														
\angle															
A.	Full Name (Last, First, Middle Initial) QuickBooks Payroll Service									ion ID isburs	_		180	475	
	Mailing Address PO Box 30015							0 ^M 1	М	/ D 2	2 4	/ Y	ž	οŏ	3 Y
	City Reno		Zip Code 89520-3015					Amou	ınt o	f Each	n Dis	burse	men	t this I	Period
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	Candidate Name			Ca	ate	gory/ pe									
	Office Sought: House Disburs Senate President State: District:	Primary Other (speci	General												
_	Full Name (Last, First, Middle Initial)							Tuona		an ID	. 00	01D	100	400	
В.	QuickBooks Payroll Service							Date		isburs	eme				Y
	Mailing Address PO Box 30015							0 1	IVI	′	2 4		2	οŏ	6
	City Reno		Zip Code 89520-3015					Amou	ınt o	f Each	n Dis	burse			Period
	Purpose of Disbursement VA - Withholding				00)1		L.		-				266.	00
	Candidate Name				ate Ty	gory/ pe									
	Senate President	sement For: Primary Other (speci	General ▼												
	State: District:														
C.	Full Name (Last, First, Middle Initial) Steve Rosa							Date	of D	on ID isburs	eme	. — . — .	180	557	
	Mailing Address 4829 West Braddock R	oad, Apt 3						0 ^M 1	М	/ D	17	/ <u>Y</u>	ž	οŏ	3 Y
	City Alexandria	State VA	Zip Code 22311					Amou	ınt o	f Each	n Dis	burse	men	t this	Period
	Purpose of Disbursement Non Candidate Desktop Publishing Service				00)3								457.	50
	Candidate Name					gory/ pe									
	Senate President	sement For: Primary Other (speci	General ▼												
	State: District:														
s	UBTOTAL of Disbursements This Page (optional)				•	•	L.						724.	71
т	OTAL This Period (last page this line number onl	y)				•	•								

	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)				FOR LINE NUMBER: PAGE 42 / 102 (check only one)								
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		X	21b 27	22 28a		23 28b		24 28c		25 29	26 30k
	y Information copied from such Reports and Statem for commercial purposes, other than using the name													3
\vdash	NAME OF COMMITTEE (In Full)		71											
$ \rangle$	Libertarian National Committee													
Α.	Full Name (Last, First, Middle Initial) Chris D Thorman						Trans Date			_		.1804	455	
	Mailing Address 4527 Wilson Blvd #101						0 ^M 1	М	/ D	1 1	/	Ý Ž	0 ŏ 6	Y
		State VA	Zip Code 22203				Amou	int o	f Eac	h Di	sburs			
	Purpose of Disbursement Employee Net Pay				00			_					766.0)2
	Candidate Name			C	ateg Typ	-								
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General											
_	State: District:													
В.	Full Name (Last, First, Middle Initial) Chris D Thorman						Trans Date	of D	isbur	sem	ent			_
	Mailing Address 4527 Wilson Blvd #101						01 25]	ž	0 ŏ 6	Y
	,	State VA	Zip Code 22203				Amou	int o	f Eac	h Di	sburse			-
	Purpose of Disbursement Employee Net Pay Candidate Name			C	00 ateg	jory/	L.						867.9	98
	Senate President	ment For: Primary Other (spe	General ▼											
<u> </u>	Full Name (Last, First, Middle Initial)						Trans					.1805	539	
	Mailing Address 1304 Hornby Street							M		3 1		Ý Ž	o ŏ 6	Y
	•	State ZZ	Zip Code				Amou	int o	f Eac	h Di	sburse	ement	this F	'eriod
	Purpose of Disbursement EOM Credit Card Processing Fees			Γ	00	1							250.6	36
	Candidate Name			С	ateg Typ									
	Office Sought: Senate President State: Disburse Disburse	ement For: Primary Other (spe	General ecify) ▼											
[UBTOTAL of Disbursements This Page (optional) .					•						18	384.6	66
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	CHEDULE B (FEC Form 3X)	Use sep	erate schedule(s)	FOR LINE		PAGE 43 / 102
IT	EMIZED DISBURSEMENTS	for each Detailed	category of the Summary Page	(check only 21b 27	22 23 23 28a 28b	24 25 26 28c 29 30l
	y Information copied from such Reports and for commercial purposes, other than using t					
Ü	NAME OF COMMITTEE (In Full)		ee e. a., peea.			
\rangle	Libertarian National Committee					
Α.	Full Name (Last, First, Middle Initial) US LEC				Date of Disburse	
	Mailing Address PO Box 60130				01 / 1	7 2006
	City Charlotte	State NC	Zip Code 28260-1310		Amount of Each	Disbursement this Period
	Purpose of Disbursement			001		475.51
	Telephone and Data Services Candidate Name			O01 Category/ Type		
	Office Sought: House Senate President	Disbursement For: Primary Other (spe	General ecify) ▼	71		
	State: District:					
В.	Full Name (Last, First, Middle Initial) US LEC				Date of Disburse	
	Mailing Address PO Box 60130				01 / 3	1 2006
	City Charlotte	State NC	Zip Code 28260-1310		Amount of Each	Disbursement this Period
	Purpose of Disbursement Telephone and Data Services Candidate Name			001 Category/		550.00
				Type		
	Senate President	Disbursement For: Primary Other (spe	General ecify) ▼			
	State: District: Full Name (Last, First, Middle Initial)					
C.	VA Dept. of Taxation				Date of Disburse	
	Mailing Address PO Box 1278				01 / 2	4 2006
	City Richmond	State VA	Zip Code 23218-1278		Amount of Each	Disbursement this Period
	Purpose of Disbursement VA - Unemployment Company			001		105.05
	Candidate Name			Category/ Type		
	Senate President	Disbursement For: Primary Other (spe	General ecify) ▼			
_	State: District:					
s	UBTOTAL of Disbursements This Page (or	otional)		<u>►</u>		1130.56
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S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 44 / 102
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	y Information copied from such Reports and S for commercial purposes, other than using the			
$\overline{}$	NAME OF COMMITTEE (In Full)			
	Libertarian National Committee			
	Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.180528
۹.	WMATA - Metrochek			Date of Disbursement
	Mailing Address 600 Fifth St NW			01 05 7 2006
	City Washington	State Zip Code DC 20001		Amount of Each Disbursement this Period
	Purpose of Disbursement Metrochecks		001	400.00
	Candidate Name		Category/ Type	
	Office Sought: House Dis Senate	bursement For: Primary General		
	President	Other (specify)		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	400.00
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PAGE 45 / 102 FOR LIN

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only one)	X	9
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Excluding Loans		numbered line)	10							
NAME OF COMMITTEE (In Full) Libertarian National Committee										
A. Full Name (Last, First, Middle Initial) of Debtor or Christopher Darzinski	Creditor		Nature of Debt (Purpose): Advertising							
Mailing Address 1359 Chandler Ave										
City State Lincoln Park MI	ZIP Code 48146-2009									
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD9.15703							
20.00										
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period							
0.00	0.00		20.00							
B. Full Name (Last, First, Middle Initial) of Debtor or Allen Hendrix	Creditor	Nature of D Advertisin	ebt (Purpose): g							
Mailing Address 546 Bear Creek Rd										
City State Carrollton GA	ZIP Code 30117-7669									
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period									
25.00										
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period							
0.00	0.00		25.00							
1) SUBTOTALS This Period This Page (optional)		•	45.00							
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3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>								
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	→								

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	X	1

Excluding Loans		numbered line)	(Check only one) X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor or Accurint	Creditor		ebt (Purpose): nd Phone Verific-
Mailing Address P.O. Box 538358			
City State Atlanta GA	ZIP Code 30353-8358		
Outstanding Balance Beginning This Period		Trar	nsaction ID: SD10.175168
127.50			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	0.00		127.50
B. Full Name (Last, First, Middle Initial) of Debtor or Advanced Mailing Services, LLC	Creditor		ebt (Purpose): idate Printing/Ma-
Mailing Address 14970 Farm Creek Drive			
City State Woodbridge VA	ZIP Code 22191-3550		
Outstanding Balance Beginning This Period		Trar	nsaction ID: SD10.177674
1167.35			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	0.00		1167.35
C. Full Name (Last, First, Middle Initial) of Debtor or Advanced Mailing Services, LLC	Creditor		ebt (Purpose): idate Printing/Ma-
Mailing Address 14970 Farm Creek Drive			
City State	ZIP Code		
Woodbridge VA	22191-3550		
Outstanding Balance Beginning This Period		Trar	nsaction ID: SD10.180568
0.00			
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
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(Use separate schedule(s)

PAGE 47 / 102 FOI

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Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor of Advocates for Self Government	r Creditor	Nature of D Quiz Card	ebt (Purpose): Is
Mailing Address 5 South Public Square #304			
City State Cartersville GA	ZIP Code 30120		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.80520
830.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		830.00
B. Full Name (Last, First, Middle Initial) of Debtor of American National Insurance Co.	r Creditor		ebt (Purpose): n Remittance
Mailing Address Attn: Lea Pollack P. O. Box 1830 - Pension De	ept.		
City State Galviston TX	ZIP Code 77550-1830		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.177691
478.86 Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of This Period
0.00	0.00		478.86
C. Full Name (Last, First, Middle Initial) of Debtor of American National Insurance Co.	r Creditor		ebt (Purpose): n Remittance
Mailing Address Attn: Lea Pollack P. O. Box 1830 - Pension De	ent		
City State	ZIP Code		
Galviston TX Outstanding Balance Beginning This Period	77550-1830	T	
Outstanding Balance Beginning This Period		ıra	nsaction ID: SD10.180569
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
492.31	0.00		492.31
1) SUBTOTALS This Period This Page (optional)		•	1801.17
2) TOTALS This Period (last page this line number on	ly)	>	
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	-	

(Use separate schedule(s)

PAGE 48 / 102 FOR LINE NUMBER:

EBTS AND OBLIGATIONS			r each bered line)	(check only one)	9
xcluding Loans NAME OF COMMITTEE (In Full)		Harris	ocrea iirie)		X 10
Libertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor or B & B Duplicators	Creditor			ebt (Purpose): lailing Non Cand-	
Mailing Address 818 18th Street NW LL15			idato		
City State Washington DC	ZIP Code 20006				
Outstanding Balance Beginning This Period 2226.05			Trai	nsaction ID: SD10.17	71284
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of T	Γhis Period
0.00	0.00)			2226.05
B. Full Name (Last, First, Middle Initial) of Debtor or B & B Duplicators	Creditor			ebt (Purpose): lailing Non Cand-	
Mailing Address 818 18th Street NW LL15					
City State Washington DC	ZIP Code 20006				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.17	75104
666.23					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of	This Period
0.00	0.00)			666.23
C. Full Name (Last, First, Middle Initial) of Debtor or B & B Duplicators	Creditor			ebt (Purpose): lailing Non Cand-	
Mailing Address 818 18th Street NW LL15					
City State Washington DC	ZIP Code 20006				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.17	77675
338.40					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of	This Period
0.00	0.00	0			338.40
1) SUBTOTALS This Period This Page (optional)		. •		3230	.68
2) TOTALS This Period (last page this line number only	y)	>			
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	. •			
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	·) •			

(Use separate schedule(s) for each

PAGE 49 / 102

OR LINE NUMBER:		
check only one)		9
	$\overline{\mathbf{v}}$	10

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		ebt (Purpose):
Dean Bankert		Advertisin	g
Mailing Address 1080 Fairfield Road			
City State Gettysburg PA	ZIP Code 17325		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34463
22.50			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	0.00		22.50
B. Full Name (Last, First, Middle Initial) of Debtor of Blackbaud	or Creditor	Nature of D Database	ebt (Purpose): Services
Mailing Address P.O. Box 930256			
City State Atlanta GA	ZIP Code 31193-0256		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.130069
2530.80			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	0.00		2530.80
C. Full Name (Last, First, Middle Initial) of Debtor of Blackbaud	or Creditor		ebt (Purpose): Annual Licensing
Mailing Address P.O. Box 930256			
City State Atlanta GA	ZIP Code 31193-0256		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.175106
7915.65			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	7915.65		0.00
1) SUBTOTALS This Period This Page (optional)		•	2553.30
2) TOTALS This Period (last page this line number or	nly)	>	
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	-	

PAGE 50 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Que Software Licensing Fee 1/06-12/06 Blackbaud Mailing Address P.O. Box 930256 City State ZIP Code Atlanta GΑ 31193-0256 Outstanding Balance Beginning This Period Transaction ID: SD10.177692 3347.06 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3347.06 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Edward Bowers** Advertising Mailing Address 291 S La Cienega Blvd # 638 ZIP Code City State Beverly Hills CA 90211-3325 Outstanding Balance Beginning This Period Transaction ID: SD10.32948 63.75 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 0.00 63.75 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Virginia Brewer Advertising Mailing Address P.O. Box 237 State ZIP Code City Saunderstown RI 02874 Outstanding Balance Beginning This Period Transaction ID: SD10.32954 56.25 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 56.25 3467.06 1) SUBTOTALS This Period This Page (optional).....

2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

(Use separate schedule(s) for each

PAGE 51 / 102 FOR LINE NUMBER: (check only one)

NAME OF COMMITTEE (In Full)	
Libertarian National Committee	

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
		1	
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		ebt (Purpose):
Virginia Brewer		Advertisin	ig
Mailing Address P.O. Box 237			
3 11 11 1 1 1 20 X 20 X			
City State	ZIP Code		
Saunderstown RI	02874		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.33003
56.25			
		0	D
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00)	56.25
B. Full Name (Last, First, Middle Initial) of Debt	or or Creditor	Nature of D	ebt (Purpose):
Brown, Wanda O		Non Cand Consultin	didate Direct Mail
Mailing Address 21306 Blackjack Road			9
Walling Address 21000 Blackjack Hoad			
City State	ZIP Code		
Shelbyville IN	46176-9310		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.180570
0.00			
Amount Incurred This Period	Payment This Period	Outstandi	na Dalanca et Clasa et This Devied
			ng Balance at Close of This Period
100.00	0.00		100.00
O E II Novo (Lost Elect Middle 1-25) v (Polit	on a Constitution	Natura of D	valet (D
C. Full Name (Last, First, Middle Initial) of Debt Central Parking System	or or Greditor	Parking	ebt (Purpose):
Solitar analy System		, and	
Mailing Address PO Box 17505			
011	710.0		
City State Baltimore MD	ZIP Code 21297-1505		
	21207 1000	_	
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.106351
25.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00	, , ,	25.00
	313,		
		-	
1) SUBTOTALS This Period This Page (optional)		. •	181.25
O. TOTALO TI: D : 1/1		>	
2) TOTALS This Period (last page this line numbe	r oniy)		
3) TOTALS OUTSTANDING LOANS from Schee	dule C (last page only)	. ▶]]	
-,	(_ =	
4) ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page only)) >	

(Use separate schedule(s)

PAGE 52 / 102 F

OR LINE NUMBER:	
check only one)	

Excludin	a Loans			each ered line)	(check only one)	X 10
	COMMITTEE (In Full)					Λ 10
	an National Committee					
	III Name (Last, First, Middle Initial) of Debtor o al Parking System	r Creditor		lature of De Parking	ebt (Purpose):	
Mailing	g Address PO Box 17505					
City Baltin	State nore MD	ZIP Code 21297-1505				
Out	standing Balance Beginning This Period			Trar	nsaction ID: SD10.17	'1248
	125.00					
	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
	0.00	0.00	ס			125.00
	Ill Name (Last, First, Middle Initial) of Debtor o	r Creditor	L		ebt (Purpose): Writing Non Candi-	
Mailing	g Address 1013 Price Ave					
City Colur	State nbia SC	ZIP Code 29201-1857				
Out	standing Balance Beginning This Period			Trar	nsaction ID: SD10.18	0571
	0.00					
	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
	1750.00	0.00	0		1	750.00
	III Name (Last, First, Middle Initial) of Debtor o Insurance	r Creditor		lature of Densurance	ebt (Purpose):	
Mailing	g Address PO Box 382033					
City Pittsb	State ourgh PA	ZIP Code 15250				
Out	standing Balance Beginning This Period			Trar	nsaction ID: SD10.69	872
	953.80					
	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
	0.00	953.80	0			0.00
1) SUBT	OTALS This Period This Page (optional)		. •		1875.	00
2) TOTA	LS This Period (last page this line number on	ıly)	. •			
3) ТОТА	LS OUTSTANDING LOANS from Schedule	C (last page only)	. •			
4) ADD 2	2) and 3) and carry forward to appropriate lin-	e of Summary Page (last page only)	<u>)</u>			

(Use separate schedule(s) for each

PAGE 53 / 102

FOR LINE NUMBER:
(check only one)

DEBTS AND OBLIGATIONS			r each	(check only one) 9
Excluding Loans		numb	pered line)	X 10
NAME OF COMMITTEE (In Full)				
Libertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			ebt (Purpose):
Commonwealth Digital Office Solutions			Office Cop	oier Maintenance
Mailing Address 21205 Ridgetop Circle				
Mailing Address 21203 Hidgetop Circle				
City State	ZIP Code			
Sterling VA	20166-6501			
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.171287
				100011011121 02 10.17 1207
249.32				
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period
0.00	123.69	9		125.63
0.00	120.00			120.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of De	ebt (Purpose):
Commonwealth Digital Office Solutions				pier Maintenance
-				
Mailing Address 21205 Ridgetop Circle				
O'ty	710.0 - 1-			
City State Sterling VA	ZIP Code 20166-6501			
	20100 0001			
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.175108
135.08				
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period
0.00	0.00)		135.08
O Full Name (Last First Middle Initial) of Debter	au Ovaditau		Natura of D	alat (Dumana)
C. Full Name (Last, First, Middle Initial) of Debtor Commonwealth Digital Office Solutions	or Creditor			ebt (Purpose): pier Maintenance
Commonwealth Digital Cinico Colations			O11100 00p	sici Manteriarios
Mailing Address 21205 Ridgetop Circle				
<u> </u>				
City State	ZIP Code			
Sterling VA	20166-6501			
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.177676
155.02				
Associate Incomed This Deviced	Downsont This Davied		Ot.a.t.a	on Balance at Class of This Baried
Amount Incurred This Period	Payment This Period	-	Outstandir	ng Balance at Close of This Period
0.00	0.00)		155.02
				415.73
1) SUBTOTALS This Period This Page (optional)		<u>. </u>		413.76
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2, 101ALO TINOT GROW (RASE PAGO UNO MITO HUMBOR C	'''',,,			
3) TOTALS OUTSTANDING LOANS from Schedu	e C (last page only)	. •		<u>., , , , , , , , , , </u>
,	, 10 //			
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)) •		

(Use separate schedule(s) for each

PAGE 54 / 102

FOR LINE NUMBER:
(check only one)

DEBTS AND OBLIGATIONS			or each	(check only one)	9
Excluding Loans		numb	pered line)	, ,	X 10
NAME OF COMMITTEE (In Full)			'		
Libertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor or	Creditor		Nature of De	ebt (Purpose):	
Commonwealth Digital Office Solutions				pier Maintenance	
Mailing Address 21205 Ridgetop Circle					
City State	ZIP Code				
Sterling VA	20166-6501				
Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.180	0572
0.00					
0.00					
Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of Th	nis Period
125.01	0.00	'			125.01
123.01	0.00				123.01
B. E. II Nicoco (Local Elect Middle Leifel) of Deleter on	0		National of D	-l-L (D)	
B. Full Name (Last, First, Middle Initial) of Debtor or Corporate & Leisure	Creditor		Staff Trave	ebt (Purpose):	
Corporate & Leisure			Stall Have	ʊ I	
Mailing Address 2700 West Cyprus Creek Rd	Ste D-10				
Walling Address 2700 West Cyprus Creek Nu	Ste D-10				
City State	ZIP Code				
Fort Lauderdale FL	33309				
Outstanding Balance Beginning This Period		,	Tuan	nsaction ID: SD10.17	1200
Outstanding Datance Deginning This Feriod			ırar	isaction id: 3D10.17	1200
822.18					
Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of Th	nis Period
		-			
0.00	0.00				822.18
C. Full Name (Last, First, Middle Initial) of Debtor or	Creditor			ebt (Purpose):	
Cory Consulting			Internet Li	st Services	
Mallian Address 205 October 211 Book O. Tree	400				
Mailing Address 325 Garrisonville Road Suite	106				
City State	ZIP Code				
Stafford VA	22554				
			_	004040	2050
Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.106	5352
1905.00					
Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of Th	nis Period
Amount incurred This Feriod		-	Outstarium	ig Balance at Glose of Th	iis i criod
0.00	0.00			1:	905.00
		_	-	0050	10
1) SUBTOTALS This Period This Page (optional)				2852.1	19
					' '
2) TOTALS This Period (last page this line number only	′)				
a) TOTAL COUTOTANDING LOADS (2 (11	•			
3) TOTALS OUTSTANDING LOANS from Schedule ((last page only)	•			
4) ADD 2) and 2) and some forward to consider the	of Cummony Dage (lest same and)	,			
4) ADD 2) and 3) and carry forward to appropriate line	or Summary Page (last page only)	_			

(Use separate schedule(s) for each

PAGE 55 / 102

FOR LINE NUMBER: (check only one)

Excluding Loans		numbered li	ne) X 10
NAME OF COMMITTEE (In Full)		,	
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature	e of Debt (Purpose):
Cory Consulting			net List Services
Mailing Address 325 Garrisonville Road Suit	e 106		
ividining / iddicess 525 dairisonvine riodd ddiff	e 100		
City State Stafford VA	ZIP Code 22554		
	22004		OD40 400570
Outstanding Balance Beginning This Period			Transaction ID: SD10.180573
0.00			
Amount Incurred This Period	Payment This Period	Outs	tanding Balance at Close of This Period
930.00	0.00)	930.00
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature	e of Debt (Purpose):
Thomas Cox			rtising
Mailing Address 12602 SW Farmington Roa	d		
City State Beaverton OR	ZIP Code 97005		
Outstanding Balance Beginning This Period			Transaction ID: SD10.32960
487.50			
Amount Incurred This Period	Payment This Period	Outs	tanding Balance at Close of This Period
0.00	0.00		487.50
C. Full Name (Last, First, Middle Initial) of Debtor of Thomas Cox	or Creditor		e of Debt (Purpose): rtising
Thomas Gox		, lave	tionig
Mailing Address 12602 SW Farmington Road	d		
City State	ZIP Code		
Beaverton OR	97005		
Outstanding Balance Beginning This Period			Transaction ID: SD10.32961
487.50			
Amount Incurred This Period	Payment This Period	Outs	tanding Balance at Close of This Period
0.00	0.00	0	487.50
1) SUBTOTALS This Period This Page (optional)		. •	1905.00
2) TOTALS This Period (last page this line number or	alv)	_,	
2) TOTALO TINOT GROW (rast page tris line number of	"y;·····		
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	•	
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only) ▶	

(Use separate schedule(s)

PAGE 56 / 102 FOR LINE NUMBER:

	9
Х	10

Excluding Loans		for each numbered line)	(check only one)	X 10
NAME OF COMMITTEE (In Full)		•		
Libertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor		ebt (Purpose):	
Dataprise		Internet S	ervices	
Mailing Address PO Box 17672				
DOX 17672				
City State	ZIP Code			
Baltimore MD	21297			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.17	1289
1901.25				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of Th	nis Period
0.00	0.00	, , , , , , , , , , , , , , , , , , , ,	1:	901.25
B. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor	Nature of D	ebt (Purpose):	
Dataprise	Orealtor	Internet S		
·				
Mailing Address PO Box 17672				
City State	ZIP Code			
Baltimore MD	21297			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.177	7677
		IIa	iisaction ib. OD10.17	7077
990.00				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of Th	nis Period
0.00	0.00			990.00
C. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor		ebt (Purpose):	
De Lage Landen Financial		Equipmen	it Lease	
Mailing Address PO Box 41601				
DOX 11001				
City State	ZIP Code			
Philadelphia PA	19101-1601			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.110	0792
542.98				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of Th	nis Period
0.00	541.55			1.43
0.00	341.30	<u>'</u>		1.45
			1 1 1 1 1	
1) SUBTOTALS This Period This Page (optional)		. •	2892.6	68
				' '
2) TOTALS This Period (last page this line number on	lly)	_ >		
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only).	. •		
	- C (last page 5)	_		
4) ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page only)	>		

Image# 26980146635 PAGE 57 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): De Lage Landen Financial Equipment Lease Mailing Address PO Box 41601 City State ZIP Code Philadelphia PA 19101-1601 Outstanding Balance Beginning This Period Transaction ID: SD10.171253 517.12 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 517.12 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): De Lage Landen Financial **Equipment Lease** Mailing Address PO Box 41601 ZIP Code State City Philadelphia PA 19101-1601 Outstanding Balance Beginning This Period Transaction ID: SD10.171290 517.12 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 517.12 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose):

	Amount Incurred This Period	Payment This Period	Outsta	anding	Balan	ce at (Close o	f This F	² eriod
	0.00	0.00						593	3.27
1)	SUBTOTALS This Period This Page (optional)					1	162	7.51	
2)	TOTALS This Period (last page this line number	r only)							
3)	TOTALS OUTSTANDING LOANS from Sche	dule C (last page only)							
									·

ZIP Code

19101-1601

Equipment Lease

Transaction ID: SD10.177678

De Lage Landen Financial

Mailing Address PO Box 41601

State

PA

Outstanding Balance Beginning This Period

593.27

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

City

Philadelphia

(Use separate schedule(s)

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FOR LINE NUMBER:
(check only one)

DEBTS AND OBLIGATIONS		for e		(check only one)	9
Excluding Loans		number	umbered line)		X 10
NAME OF COMMITTEE (In Full)					
Libertarian National Committee					
A Full Name (Last First Middle Initial) of Debter	or Croditor	N	oture of D	oht (Durmasa).	
A. Full Name (Last, First, Middle Initial) of Debtor De Lage Landen Financial	or Creditor		ature of Di quipmen	ebt (Purpose): t Lease	
Be Lage Landen i mandial		-	quipinion	t Loado	
Mailing Address PO Box 41601					
City State	ZIP Code				
Philadelphia PA	19101-1601				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.18	30574
0.00					
Amount Incurred This Period	Payment This Period	(Outstandir	ng Balance at Close of	This Period
526.30	0.00	ס "	' '		526.30
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	N	ature of D	ebt (Purpose):	
District of Columbia Libertarian Party			MP payr		
Mailing Address 4733 First Street SW #303					
Oh Oh	710.0				
City State Washington DC	ZIP Code 20005				
	20003				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.34	4610
87.00					
Amount Incurred This Period	Payment This Period	(Jutetandir	ng Balance at Close of ⁻	Thic Pariod
		-	Juistanun	ig balance at 0103c of	TTIIS T CHOO
0.00	0.00)			87.00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			ebt (Purpose):	
Michael Dixon		ai		mbursement-Airf-	
Mailing Address 116 N Brackenbury Ln					
Mailing Address 110 N Brackerbury Em					
City State	ZIP Code				
Charlotte NC	28270-1901				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.1	10793
				1000110111211 02 1011	. 07 00
439.32					
Amount Incurred This Period	Payment This Period	(Outstandir	ng Balance at Close of	This Period
0.00	0.00)			439.32
					.00.02
			1 1		1 1
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				1 1 1 1 1	
2) TOTALS This Period (last page this line number of	nly)	<u>. </u>			
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate li	no of Summary Boso /last nose and	<u> </u>			
אטא בוע בן and s) and carry forward to appropriate if	ne or Summary Fage (last page only	, <u> </u>			

(Use separate schedule(s) for each

PAGE 59 / 102 FOR LINE NUMBER: (check only one)

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor or Paula Edwards, CPA	Creditor		Debt (Purpose): apliance/File Retri- Repair
Mailing Address 1318 Roxanna Road NW			•
City State Washington DC	ZIP Code 20012		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.177679
31175.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		31175.00
	0 11:		
B. Full Name (Last, First, Middle Initial) of Debtor or ENTCO Int. Inc	Creditor		bebt (Purpose): Convention Servi- ulting
Mailing Address 20016 Cedar Valley Road			
City State Lynnwood WA	ZIP Code 98036		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.175109
4000.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		4000.00
C. Full Name (Last, First, Middle Initial) of Debtor or ENTCO Int. Inc	Creditor		Debt (Purpose): Convention Servi- ulting
Mailing Address 20016 Cedar Valley Road			
City State	ZIP Code		
Lynnwood WA	98036		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.177681
3150.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00)	3150.00
1) SUBTOTALS This Period This Page (optional)		. •	38325.00
2) TOTALS This Period (last page this line number onl	у)	. >	0 0 0 0 0 0
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	. >	
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)) >	

(Use separate schedule(s) for each

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FOR LINE NUMBER:
(check only one)

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor o ENTCO Int. Inc	r Creditor		Debt (Purpose): unvention Services ng
Mailing Address 20016 Cedar Valley Road			
City State Lynnwood WA	ZIP Code 98036		
Outstanding Balance Beginning This Period		Tr	ansaction ID: SD10.180575
0.00			
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of This Period
3000.00	0.00		3000.00
B. Full Name (Last, First, Middle Initial) of Debtor o Gillis Data & Information Services, LLc	r Creditor	Nature of Printing/idate	Debt (Purpose): Mailing Non Cand-
Mailing Address 8990 Westchester Dr			
City State Manassas VA	ZIP Code 20112-4504		
Outstanding Balance Beginning This Period		Tr	ansaction ID: SD10.110797
1277.39			
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of This Period
0.00	0.00		1277.39
C. Full Name (Last, First, Middle Initial) of Debtor o Patrick Heller	r Creditor	Nature of Advertisi	Debt (Purpose): ng
Mailing Address 300 Frandor Ave			
City State Lansing MI	ZIP Code 48909		
Outstanding Balance Beginning This Period		Tr	ansaction ID: SD10.34464
850.00			
Amount Incurred This Period	Payment This Period	Outstand	ling Balance at Close of This Period
0.00	0.00		850.00
1) SUBTOTALS This Period This Page (optional)		 	5127.39
2) TOTALS This Period (last page this line number on	ly)	>	
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	>	

(Use separate schedule(s) for each

PAGE 61 / 102

FOR LINE NUMBER:
(check only one)

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor o David Hollist	r Creditor	Nature of D Advertisin	ebt (Purpose): g
Mailing Address PO Box 1414			
City State Alta Loma CA	ZIP Code 91701-8414		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.18263
45.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		45.00
B. Full Name (Last, First, Middle Initial) of Debtor o David Hollist	r Creditor	Nature of D Advertisin	ebt (Purpose): g
Mailing Address PO Box 1414			
City State Alta Loma CA	ZIP Code 91701-8414		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.18264
45.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		45.00
C. Full Name (Last, First, Middle Initial) of Debtor o David Hollist	r Creditor	Nature of D Advertisin	ebt (Purpose): Ig
Mailing Address PO Box 1414			
City State Alta Loma CA	ZIP Code 91701-8414		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.18265
45.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		45.00
1) SUBTOTALS This Period This Page (optional)		>	135.00
2) TOTALS This Period (last page this line number on	ly)	>	
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate lin-	e of Summary Page (last page only)	-	

(Use separate schedule(s) for each numbered line)

PAGE 62 / 102 FOR LINE NUMBER: (check or

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Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor of Integram	or Creditor		ebt (Purpose): lidate Printing Se-
Mailing Address 8421 Hilltop Rd.			
City State Fairfax VA	ZIP Code 22031-4316		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.80541
9903.93			
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
0.00	0.00		9903.93
B. Full Name (Last, First, Middle Initial) of Debtor of J&N Printing	or Creditor		ebt (Purpose): failing Non Cand-
Mailing Address 5495 Glenthorne Court			
City State Baltimore MD	ZIP Code 21237		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.171291
0.20			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		0.20
C. Full Name (Last, First, Middle Initial) of Debtor of J&N Printing	or Creditor	Nature of D Printing/N idate	ebt (Purpose): failing Non Cand-
Mailing Address 5495 Glenthorne Court			
City State Baltimore MD	ZIP Code 21237		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.175112
2333.46			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		2333.46
1) SUBTOTALS This Period This Page (optional)		•	12237.59
2) TOTALS This Period (last page this line number or	nly)	>	
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page only)	>	

(Use separate schedule(s) for each

PAGE 63 / 102

OR LINE NUMBER:		
check only one)		9
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Excluding Loans		numbered line) X 10
NAME OF COMMITTEE (In Full)		
Libertarian National Committee		
A. Full Name (Last, First, Middle Initial) of Debtor of J&N Printing	or Creditor	Nature of Debt (Purpose): Printing/Mailing Non Candidate
Mailing Address 5495 Glenthorne Court		
City State Baltimore MD	ZIP Code 21237	
Outstanding Balance Beginning This Period		Transaction ID: SD10.175172
2289.75		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	0.00	
0.00	0.00	2209.73
B. Full Name (Last, First, Middle Initial) of Debtor of J&N Printing	or Creditor	Nature of Debt (Purpose): Printing/Mailing Non Candidate
Mailing Address 5495 Glenthorne Court		
City State Baltimore MD	ZIP Code 21237	
Outstanding Balance Beginning This Period		Transaction ID: SD10.177683
1837.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	
C. Full Name (Last, First, Middle Initial) of Debtor of J&N Printing	or Creditor	Nature of Debt (Purpose): Non Candidate Party Letter Mailing
Mailing Address 5495 Glenthorne Court		
City State Baltimore MD	ZIP Code 21237	
Outstanding Balance Beginning This Period		Transaction ID: SD10.180576
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Polonge at Class of This Povind
	· · · · · · · · · · · · · · · · · · ·	Outstanding Balance at Close of This Period
2520.00	0.00	2520.00
1) SUBTOTALS This Period This Page (optional)		▶ 6646.75
2) TOTALS This Period (last page this line number or	nly)	>
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	•
4) ADD 2) and 3) and carry forward to appropriate lir	ne of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 64 / 102
FOR LINE NUMBER: (check only one)

Excluding Loans	numbered line)	Х	10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			

ibertarian National Committee		
A. Full Name (Last, First, Middle Initial) of Debtor Joe Ragan's	or Creditor	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 125		-
City State Soringfield VA	ZIP Code 22150-0125	
Outstanding Balance Beginning This Period		Transaction ID: SD10.175113
118.10		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	118.10	0.00
B. Full Name (Last, First, Middle Initial) of Debtor Joe Ragan's	or Creditor	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 125		
City State Soringfield VA	ZIP Code 22150-0125	
Outstanding Balance Beginning This Period		Transaction ID: SD10.177685
327.19		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	327.19	0.00
C. Full Name (Last, First, Middle Initial) of Debtor Joe Ragan's	or Creditor	Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 125		-
City State	ZIP Code	
Soringfield VA	22150-0125	
Outstanding Balance Beginning This Period		Transaction ID: SD10.180578
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
155.75	0.00	155.75
SUBTOTALS This Period This Page (optional)		155.75
TOTALS This Period (last page this line number of	only)	>
TOTALS OUTSTANDING LOANS from Schedu	le C (last page only)	>

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

(Use separate schedule(s) for each numbered line) PAGE 65 / 102

FOR LINE NUMBER: (check only one) 9

Excluding Loans	numbered line)	X 10
NAME OF COMMITTEE (In Full)		
Libertarian National Committee		

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Krieg Family Trust		Nature of Debt (Purpose): Advertising	
Mailing Address 23207 Night Heron Way			
City State Bradenton FL	ZIP Code 34202		
Outstanding Balance Beginning This Period		Transaction ID: SD10.34417	
200.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	200.00	
B. Full Name (Last, First, Middle Initial) of Debtor Lewis, Dan	or Creditor	Nature of Debt (Purpose): Editing Services Non Candidate	
Mailing Address 8755 Grantham Court			
City State Bristow VA	ZIP Code 20136		
Outstanding Balance Beginning This Period		Transaction ID: SD10.175114	
250.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	250.00	
C. Full Name (Last, First, Middle Initial) of Debtor Jack Lewis	or Creditor	Nature of Debt (Purpose): Advertising	
Mailing Address 5206 Chinook Ave		_	
City State Boise ID	ZIP Code 83669-5606		
Outstanding Balance Beginning This Period		Transaction ID: SD10.32977	
165.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	165.00	
) SUBTOTALS This Period This Page (optional)		▶ 615.00	
) TOTALS This Period (last page this line number o	nlv)	>	

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

(Use separate schedule(s)

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FOR LINE NUMBER:
(check only one)

Excluding Loans		numbered line)	(Check only one) 9 X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor (Libertarians for Life	or Creditor	Nature of D Advertisin	ebt (Purpose): g
Mailing Address 13424 Hathaway Drive			
City State Wheaton MD	ZIP Code 20906		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34419
18.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		18.00
B. Full Name (Last, First, Middle Initial) of Debtor Libertarians for Life	or Creditor	Nature of D Advertisin	ebt (Purpose): g
Mailing Address 13424 Hathaway Drive			
City State Wheaton MD	ZIP Code 20906		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34420
18.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		18.00
C. Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	or Creditor	Nature of D Advertisin	ebt (Purpose): g
Mailing Address 13424 Hathaway Drive			
City State Wheaton MD	ZIP Code 20906		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34421
18.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		18.00
1) SUBTOTALS This Period This Page (optional)		•	54.00
2) TOTALS This Period (last page this line number o	nly)	>	
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	>	

(Use separate schedule(s)

PAGE 67 / 102 FC

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	ding Loans			each ered line)	(check only one)	X 10
	E OF COMMITTEE (In Full)					X 10
	tarian National Committee					
Α.	Full Name (Last, First, Middle Initial) of Debtor o	r Creditor		Nature of De	ebt (Purpose):	
	pertarians for Life			Advertising		
Ma	ailing Address 13424 Hathaway Drive					
Cit	ty State	ZIP Code				
	heaton MD	20906				
	Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.34	422
	18.00					
	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
	0.00	0.00)			18.00
'						
	Full Name (Last, First, Middle Initial) of Debtor o pertarians for Life	r Creditor		Nature of De Advertising	ebt (Purpose): g	
Ma	ailing Address 13424 Hathaway Drive					
Cit W	ty State 'heaton MD	ZIP Code 20906				
	Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.34	423
	18.00			-		-
- '	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
	0.00	0.00)		3	18.00
	0.00	0.00				10.00
	Full Name (Last, First, Middle Initial) of Debtor o pertarians for Life	r Creditor		Nature of De Advertising	ebt (Purpose): g	
Ма	ailing Address 13424 Hathaway Drive					
Cit		ZIP Code				
	heaton MD	20906				
	Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.34	424
	18.00					
١,	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
	0.00	0.00)			18.00
1) SL	JBTOTALS This Period This Page (optional)		. •		54.	00
2) TC	OTALS This Period (last page this line number on	ily)	. •			
3) TC	OTALS OUTSTANDING LOANS from Schedule	C (last page only)	. ▶			
4) AE	DD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	<u>)</u>			

SCHEDULE D (FEC Form 3X)		(Use separate	PAGE 68 / 102
DEBTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:
Excluding Loans		for each numbered line)	(check only one) 9 X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee		,	
A. Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	r Creditor	Nature of D Advertisin	ebt (Purpose):
Mailing Address 13424 Hathaway Drive			
City State	ZIP Code		
Wheaton MD	20906		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34425
18.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00)	18.00
B. Full Name (Last, First, Middle Initial) of Debtor c Libertarians for Life	r Creditor	Nature of D Advertisin	ebt (Purpose):
Mailing Address 13424 Hathaway Drive			
City State Wheaton MD	ZIP Code 20906		
Outstanding Balance Beginning This Period 18.00		Tra	nsaction ID: SD10.34426
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		18.00
C. Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	r Creditor	Nature of D Advertisin	ebt (Purpose):
Mailing Address 13424 Hathaway Drive			
City State Wheaton MD	ZIP Code 20906		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34427
18.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		18.00
SUBTOTALS This Period This Page (optional)		•	54.00
2) TOTALS This Period (last page this line number or		_,	

(Use separate schedule(s) for each

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FOR LINE NUMBER:
(check only one)

DEBTS AND OBLIGATIONS		for e	each	(check only one) 9
Excluding Loans		numbei	red line)	X 10
NAME OF COMMITTEE (In Full)				
Libertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	or Creditor		ature of De	ebt (Purpose): g
Mailing Address 13424 Hathaway Drive				
City State Wheaton MD	ZIP Code 20906			
Outstanding Balance Beginning This Period			Tran	saction ID: SD10.34428
18.00				
Amount Incurred This Period	Payment This Period	(Outstandin	g Balance at Close of This Period
0.00	0.00			18.00
B. Full Name (Last, First, Middle Initial) of Debtor of Wanda Logan	or Creditor		ature of De	ebt (Purpose): g
Mailing Address 3718 Hoadly Loop				
City State Tumwater WA	ZIP Code 98501			
Outstanding Balance Beginning This Period		·	Trar	saction ID: SD10.34434
84.00				
Amount Incurred This Period	Payment This Paried	,	Outstandin	a Palance at Class of This Paried
	Payment This Period	-	Juisianum	g Balance at Close of This Period
0.00	0.00)		84.00
C. Full Name (Last, First, Middle Initial) of Debtor of Wanda Logan	or Creditor		ature of Ded dvertising	ebt (Purpose): g
Mailing Address 3718 Hoadly Loop				
City State	ZIP Code			
Tumwater WA	98501			
Outstanding Balance Beginning This Period			Trar	saction ID: SD10.34436
84.00				
Amount Incurred This Period	Payment This Period	,	Outstandin	g Balance at Close of This Period
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1) SUBTOTALS This Period This Page (optional)				186.00
2) TOTALS This Period (last page this line number only)				
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	. •		
4) ADD 2) and 3) and carry forward to appropriate lir	ne of Summary Page (last page only)	<u>)</u>		

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Excluding Loans		Humbe	ered line)		X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee					
Libertariari National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor	N	Nature of D	ebt (Purpose):	
Wanda Logan		A	Advertisin	g	
Mailing Address 0740 Handle Lane					
Mailing Address 3718 Hoadly Loop					
City State	ZIP Code				
Tumwater WA	98501				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.34	1437
84.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of T	This Period
0.00	0.00				84.00
0.00	0.00				04.00
B. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor	N	Nature of D	ebt (Purpose):	
Wanda Logan			Advertsiin		
Mailing Address 9749 Handly Lang					
Mailing Address 3718 Hoadly Loop					
City State	ZIP Code				
Tumwater WA	98501				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.34	1438
84.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of T	This Period
0.00	0.00				84.00
0.00	0.00	U			04.00
C. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor	ı	Nature of D	ebt (Purpose):	
Wanda Logan		A	Advertisin	g	
Mailing Address 2719 Headly Loop					
Mailing Address 3718 Hoadly Loop					
City State	ZIP Code				
Tumwater WA	98501				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.34	1439
84.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of T	This Period
0.00	0.00	0			84.00
0.00	0.00	9			04.00
1) SUBTOTALS This Period This Page (optional)		. <u> </u>		252	.00
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3) TOTALS OUTSTANDING LOANS from Schedu	ule C (last page only)	•			
4) ADD 0) and 0) and are 5	line of Commercial Desire (I	<u> </u>			
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only	<i>'</i>)			

(Use separate schedule(s) for each

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FOR LINE NUMBER:	
(check only one)	

NAME OF COMMITTEE (In Full)				
Libertarian National Committee				

DEBTS AND OBLIGATIONS			each	(check only one) 9
Excluding Loans			ered line)	X 10
NAME OF COMMITTEE (In Full)				
Libertarian National Committee				
A Full Name (Leat First Middle Initial) of Debter of	or Craditar		Noture of De	obt (Burnoco):
 A. Full Name (Last, First, Middle Initial) of Debtor of Wanda Logan 	or Creditor		Nature of De Advertising	ebt (Purpose):
Transa Iogan				
Mailing Address 3718 Hoadly Loop				
City State	ZIP Code			
Tumwater WA	98501			
Outstanding Balance Beginning This Period			Trar	saction ID: SD10.34440
84.00				
Amount Incurred This Period	Payment This Period		Outotondin	a Polonoo at Class of This Pariod
Amount incurred this Period			Outstandin	g Balance at Close of This Period
0.00	0.00)		84.00
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Nature of De	ebt (Purpose):
Wanda Logan			Advertising	
M ::				
Mailing Address 3718 Hoadly Loop				
City State	ZIP Code			
Tumwater WA	98501			
Outstanding Balance Beginning This Period			Tran	nsaction ID: SD10.34441
84.00				
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of This Period
			1	
0.00	0.00			84.00
C. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor			ebt (Purpose):
Wanda Logan		1	Advertisino	g
Mailing Address 3718 Hoadly Loop				
Walling Address 37 to Floadiy Loop				
City State	ZIP Code			
Tumwater WA	98501			
Outstanding Balance Beginning This Period			Tran	saction ID: SD10.34442
84.00				
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of This Period
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0.00	0.00	,		04.00
1) SUBTOTALS This Period This Page (optional)		•		252.00
2) TOTALS This Period (last page this line number or		. •		
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	<u> </u>	
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	·) •		

(Use separate schedule(s) for each

PAGE 72 / 102

FOR LINE NUMBER:
(check only one)

DEBTS AND OBLIGATIONS			r each	(check only one) 9
Excluding Loans			ered line)	X 10
NAME OF COMMITTEE (In Full)				
Libertarian National Committee				
A Full Name (Leat First Middle Initial) of Debter of	or Craditar		Noture of De	obt (Burnoso):
 A. Full Name (Last, First, Middle Initial) of Debtor of Wanda Logan 	or Creditor		Nature of De Advertising	ebt (Purpose):
Transa Logan				9
Mailing Address 3718 Hoadly Loop				
City State	ZIP Code			
Tumwater WA	98501			
Outstanding Balance Beginning This Period			Trar	saction ID: SD10.34444
84.00				
Amount Incurred This Period	Payment This Period		Outstandin	a Polonoo at Class of This Poriod
Amount incurred this Period		-	Outstandin	g Balance at Close of This Period
0.00	0.00)		84.00
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Nature of De	ebt (Purpose):
Wanda Logan			Advertising	
M ::				
Mailing Address 3718 Hoadly Loop				
City State	ZIP Code			
Tumwater WA	98501			
Outstanding Balance Beginning This Period			Tran	nsaction ID: SD10.34445
84.00				
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of This Period
			1	
0.00	0.00	,		84.00
C. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor			ebt (Purpose):
Wanda Logan		4	Advertisino	g
Mailing Address 3718 Hoadly Loop				
Walling Address 37 to Floadiy Loop				
City State	ZIP Code			
Tumwater WA	98501			
Outstanding Balance Beginning This Period			Tran	saction ID: SD10.34447
84.00				
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of This Period
0.00	0.00		-	84.00
0.00	0.00	,		04.00
1) SUBTOTALS This Period This Page (optional)		<u>. </u> ▶		252.00
2) TOTALS This Period (last page this line number or		 . •		
			-	
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	<u> </u>	
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	<u>)</u>		

SCHEDULE D (FEC Form 3X) (Use separate schedule(s) for each **DEBTS AND OBLIGATIONS** Exc NA Lib

BIS AND OBLIGATIONS		foi	edule(s) r each ered line)	FOR LINE NUMBE (check only one)	ER: 9 X 10
AME OF COMMITTEE (In Full) bertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor Wanda Logan	or Creditor		Nature of De Advertisin	ebt (Purpose): g	
Mailing Address 3718 Hoadly Loop					
City State Tumwater WA	ZIP Code 98501				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.0	34448
84.00					
Amount Incurred This Period	Payment This Period	. '	Outstandir	ng Balance at Close of	
0.00	0.00	0			84.00
B. Full Name (Last, First, Middle Initial) of Debtor LPAK - Libertarian Party of Alaska	or Creditor			ebt (Purpose): embership Paymer	nt
Mailing Address PMB 373 205 E Dimond Blvd					
City State Anchorage AK	ZIP Code 99515				
Outstanding Balance Beginning This Period 0.00			Trai	nsaction ID: SD10.	180581
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of	This Period
102.00	0.00	0			102.00
C. Full Name (Last, First, Middle Initial) of Debtor LPAL - Libertarian Party of Alabama	or Creditor			ebt (Purpose): embership Paymer	nt
Mailing Address 2330 Highland Ave					
City State Birmingham AL	ZIP Code 35205				
Outstanding Balance Beginning This Period 0.00			Trai	nsaction ID: SD10.	180580
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of	This Period
275.00	0.00	0			275.00
SUBTOTALS This Period This Page (optional)		•		46	1.00
TOTALS This Period (last page this line number of	only)	>		1 1 1 1	
TOTALS OUTSTANDING LOANS from Schedu	le C (last page only)				
ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only	·) •			

PAGE 73 / 102

PAGE 74 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPAR - Libertarian Party of Arkansas Mailing Address PO Box 15214 ZIP Code City State Little Rock AR 72231 Outstanding Balance Beginning This Period Transaction ID: SD10.180584 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 82.50 0.00 82.50 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPAZ - Libertarian Party of Arizona Mailing Address 4802 E. Ray Road #23-255 ZIP Code City State Phoenix ΑZ 85044 Outstanding Balance Beginning This Period Transaction ID: SD10.180582 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 396.00 396.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LPCA - Libertarian Party of California Unified Membership Payment to Affiliate Mailing Address 14547 Titus St, Suite 214 State ZIP Code City Panarama City CA 91402 Outstanding Balance Beginning This Period Transaction ID: SD10.180585 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 3286.50 0.00 3286.50 3765.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

(Use separate schedule(s)

PAGE 75 / 102 FOR LINE NUMBER: ___

DEBTS AND OBLIGATIONS		for each numbered		(check only one)	9		
Excluding Loans NAME OF COMMITTEE (In Full)		Hamberea			X 10		
Libertarian National Committee							
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LPCO - Libertarian Party of Colorado		Natur Unifito At	Nature of Debt (Purpose): Unified Membership Payment to Affiliate				
Mailing Address 1425 Brentwood St							
1 ,	IP Code 0214						
Outstanding Balance Beginning This Period			Tran	saction ID: SD10.18	30586		
0.00							
Amount Incurred This Period	Payment This Period	Out	standin	g Balance at Close of T	This Period		
721.00	0.00				721.00		
B. Full Name (Last, First, Middle Initial) of Debtor or Cr LPCT - Libertarian Party of Connecticut	editor	Unifi		ebt (Purpose): embership Payment			
Mailing Address Attn: Andy Rule PO Box 2501							
1 ,	IP Code 16457-2501						
Outstanding Balance Beginning This Period			Tran	saction ID: SD10.18	30587		
0.00							
Amount Incurred This Period	Payment This Period	Out	standin	g Balance at Close of 1	Γhis Period		
249.00	0.00				249.00		
C. Full Name (Last, First, Middle Initial) of Debtor or Cr LPDE - Libertarian Party of Delaware	editor	Natur Unifi to At	re of De ied Me ffiliate	ebt (Purpose): embership Payment			
Mailing Address P.O. Box 1472							
1 ,	IP Code 9903-1472						
Outstanding Balance Beginning This Period 0.00	0000 1112		Tran	saction ID: SD10.18	30588		
Amount Incurred This Period	Payment This Period	Out	standin	g Balance at Close of T	Γhis Period		
58.88	0.00				58.88		
SUBTOTALS This Period This Page (optional)		•	1 1	1028.	.88		
2) TOTALS This Period (last page this line number only)		. ▶	1 1				
3) TOTALS OUTSTANDING LOANS from Schedule C (_ ▶ _					
4) ADD 2) and 3) and carry forward to appropriate line of		一、					

PAGE 76 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPFL - Libertarian Party of Florida Mailing Address Libertarian Party of Florida 5901 Pendragon Lane ZIP Code City State Fort Myers FL 33912 Outstanding Balance Beginning This Period Transaction ID: SD10.180589 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1089.75 0.00 1089.75 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPGA-LIBERTARIAN PARTY OF GEORGIA Mailing Address 1874 PIEDMONT RD SUITE 590-E 7IP Code City State **ATLANTA** GA 30324 Outstanding Balance Beginning This Period Transaction ID: SD10.180590 0.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 1054.00 0.00 1054.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment LPHI - Libertarian Party of Hawaii to Affiliate Mailing Address 625 Keawe Street State ZIP Code City Honolulu HI 96813 Outstanding Balance Beginning This Period Transaction ID: SD10.180591 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 69.75 0.00 69.75 2213.50 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

PAGE 77 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPIA - Libertarian Party of Iowa Mailing Address C/O Tim Hird 3119 E Diehl Ave. City State ZIP Code **Des Moines** IΑ 50320 Outstanding Balance Beginning This Period Transaction ID: SD10.180595 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 178.88 0.00 178.88 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPID - Libertarian Party of Idaho Mailing Address c/of Gordon Wilmoth 517 Coston ZIP Code State City ID 83712 Boise Outstanding Balance Beginning This Period Transaction ID: SD10.180592 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 81.75 0.00 81.75 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment LPIL - Libertarian Party of Illinois to Affiliate Mailing Address c/of Jan Stover 515 W. Main Street State ZIP Code City Greenville IL 62246 Outstanding Balance Beginning This Period Transaction ID: SD10.180593 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 687.75 0.00 687.75 948.38 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

(Use separate schedule(s) for each

PAGE 78 / 102 FOR LI (check

INE NUMBER:		
only one)		9
	X	10

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor LPIN - Libertarian Party of Indiana	r or Creditor		lebt (Purpose): embership Payment
LETIN - Libertarian Farty of indiana		to Affiliate	embership rayment
Mailing Address 2587 S 250 E			
City State	ZIP Code		
Shelbyville IN	46176-9310		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.180594
0.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
657.50	0.00		657.50
B. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor	Nature of F	Debt (Purpose):
LPKS - Libertarian Party of Kansas	of Orealton	Unified M	embership Payment
,		to Affiliate	e ' ,
Mailing Address P.O. Box 2456			
City State	ZIP Code		
Wichita KS	67201-2456		
Outstanding Balance Beginning This Period		T	nsaction ID: SD10.180596
		ıra	insaction id: SD10.160596
0.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
242.00	0.00		242.00
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Pebt (Purpose):
LPKY - Libertarian Party of Kentucky		Unified M	embership Payment
Mailing Address 719 Talon Place		- To 7 minute	,
Mailing Address 719 Tatori Place			
City State	ZIP Code		
Louisville KY	40223		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.180597
0.00			
	Downant This Davied	Outstandi	na Dalaman at Class of This Davied
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
128.25	0.00	<u> </u>	128.25
1) SUBTOTALS This Period This Page (optional)		•	1027.75
1) CODICIALS THIS I CHOCK THIS I age (optional).			0 0 0 0 0 0 0
2) TOTALS This Period (last page this line number	only)	>	
3) TOTALS OUTSTANDING LOANS from Schedu	ule C (last page only)	•	
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)	> ; ;	
1, 7122 2, and 0, and carry remains to appropriate	mio or ourmilary rago (last page ormy)		

(Use separate schedule(s) for each

PAGE 79 / 102 FOR LINE NUMBER: (check only one)

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor of LPLA - Libertarian Party of Louisiana	Creditor	Nature of De Unified Me to Affiliate	ebt (Purpose): embership Payment
Mailing Address P.O. Box 66301			
City State Baton Rouge LA	ZIP Code 70896-6301		
Outstanding Balance Beginning This Period		Trar	nsaction ID: SD10.180598
0.00			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
143.25	0.00	<u>' </u>	143.25
B. Full Name (Last, First, Middle Initial) of Debtor of LPMA - Libertarian Party of Massachusetts	Creditor	Nature of De Unified Me to Affiliate	ebt (Purpose): embership Payment
Mailing Address PMB #276, 203 Washington	Street		
City State Salem MA	ZIP Code 01970		
Outstanding Balance Beginning This Period		Trar	nsaction ID: SD10.180600
0.00			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
436.50	0.00		436.50
450.50	0.00		430.30
C. Full Name (Last, First, Middle Initial) of Debtor of LPME - Libertarian Party of Maine	Creditor	Nature of De Unified Me to Affiliate	ebt (Purpose): embership Payment
Mailing Address P.O. Box 2020			
City State	ZIP Code		
Biddeford ME	04005-8020		
Outstanding Balance Beginning This Period		Trar	nsaction ID: SD10.180599
0.00			
Amount Incurred This Period	Payment This Period	Outstandin	ng Balance at Close of This Period
107.25	0.00		107.25
107.25	0.00		107.23
1) SUBTOTALS This Period This Page (optional)		•	687.00
2) TOTALS This Period (last page this line number on	ly)	>	
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	.	
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	→	

PAGE 80 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPME - Libertarian Party of Maine Mailing Address P.O. Box 2020 City State ZIP Code 04005-8020 Biddeford ME Outstanding Balance Beginning This Period Transaction ID: SD10.180607 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 706.50 0.00 706.50 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPMI - Libertarian Party of Michigan Mailing Address POB 27065 ZIP Code City State 48924-7065 Lansing MI Outstanding Balance Beginning This Period Transaction ID: SD10.180601 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 736.50 0.00 736.50 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LPMN - LIBERTARIAN PARTY OF MINNESOTA Unified Membership Payment to Affiliate Mailing Address PO BOX 580774 ZIP Code City State Minneapolis MN 55458-0774 Outstanding Balance Beginning This Period Transaction ID: SD10.180602 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 295.50 0.00 295.50 1738.50 1) SUBTOTALS This Period This Page (optional).....

2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

PAGE 81 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPMO - Libertarian Party of Missouri Mailing Address P.O. Box 78623 City State ZIP Code St Louis MO 63178-8623 Outstanding Balance Beginning This Period Transaction ID: SD10.180604 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 299.25 0.00 299.25 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPMS - Libertarian Party of Mississippi Mailing Address PMB 145, Suite 200 1625 E. County Line Road ZIP Code State City Jackson MS 39211-1832 Outstanding Balance Beginning This Period Transaction ID: SD10.180603 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 66.75 0.00 66.75 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LPNC - Libertarian Party of North Carolina Unified Membership Payment to Affiliate Mailing Address 1821 Hillandale Rd #1b-253 State ZIP Code City Durham NC 27705 Outstanding Balance Beginning This Period Transaction ID: SD10.180608 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 584.50 0.00 584.50

950.50

1) SUBTOTALS This Period This Page (optional).....

2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

PAGE 82 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPNE - Libertarian Party of Nebraska Mailing Address Chris Costello 2301 S 32nd Ave ZIP Code City State Omaha NE 68105 Outstanding Balance Beginning This Period Transaction ID: SD10.180579 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 76.50 0.00 76.50 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPNM - Libertarian Party of New Mexico Mailing Address Ron Bjornstad 918 Ivory Rd SE ZIP Code State City Rio Rancho NM 87124-3003 Outstanding Balance Beginning This Period Transaction ID: SD10.180606 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 182.63 0.00 182.63 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment LPNV - Libertarian Party of Nevada to Affiliate Mailing Address P.O. Box 94554 ZIP Code City State Las Vegas NV 89193-4554 Outstanding Balance Beginning This Period Transaction ID: SD10.180605 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 243.38 0.00 243.38 502.51 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

SCHEDULE D (FEC Form 3X)

(Use separate

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	DEBTS AND OBLIGATIONS		schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one) 9 X 10
NA	ME OF COMMITTEE (In Full) pertarian National Committee			11111
	A. Full Name (Last, First, Middle Initial) of Debtor (LPOH - Libertarian Party of Ohio	or Creditor		Debt (Purpose): Iembership Payment e
Ī	Mailing Address 700 Morse Rd Suite 208			
	City State Columbus OH	ZIP Code 43214		
	Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.180609
	0.00			
	Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
	693.00	0.00		693.00
	B. Full Name (Last, First, Middle Initial) of Debtor (LPOK - Libertarian Party of Oklahoma	or Creditor		Debt (Purpose): Iembership Payment e
-	Mailing Address P.O. Box 3342			
	City State Edmond OK	ZIP Code 73083-3342		
	Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.180610
	0.00			
	Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
	126.75	0.00		126.75
	C. Full Name (Last, First, Middle Initial) of Debtor of LPOR - Libertarian Party of Oregon	or Creditor	Nature of I Unified M to Affiliate	Debt (Purpose): Iembership Payment e
•	Mailing Address 12602 SW Farmington Roa	d		
	City State Beaverton OR	ZIP Code 97005-2755		
	Outstanding Balance Beginning This Period		Tra	nnsaction ID: SD10.180611
	0.00 Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
	459.00	0.00		459.00
۵,	CUIDTOTALO. This Desired This Desire (see 1.1)		•	1278.75
1)	SUBTOTALS This Period This Page (optional)			1270.70
2)	TOTALS This Period (last page this line number o	nly)	. >	

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

SCHEDULE D (FEC Form 3X)

(Use separate

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	BTS AND OBLIGATIONS		schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one) 9 X 10
NA	ME OF COMMITTEE (In Full) pertarian National Committee			
	A. Full Name (Last, First, Middle Initial) of Debtor of LPRI - Libertarian Party of Rhode Island	or Creditor		ebt (Purpose): embership Payment
	Mailing Address P.O. Box 603364			
	City State Providence RI	ZIP Code 02906		
	Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.180612
	0.00 Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
	33.00	0.00		33.00
	B. Full Name (Last, First, Middle Initial) of Debtor of LPSC - Libertarian Party of South Carolina	or Creditor		ebt (Purpose): embership Payment
	Mailing Address P.O. Box 7767			
	City State Myrtle Beach SC	ZIP Code 29572-7767		
	Outstanding Polonge Paginning This Pariod		_	nsaction ID: SD10.180613
	Outstanding Balance Beginning This Period 0.00		Ira	insaction id. 3D10.160013
	1 1 1 1 1 1 1 1 1	Payment This Period		ng Balance at Close of This Period
	0.00	Payment This Period	Outstandi	
	0.00 Amount Incurred This Period	0.00	Outstandi Nature of D	ng Balance at Close of This Period
_	0.00 Amount Incurred This Period 246.00 C. Full Name (Last, First, Middle Initial) of Debtor of	0.00	Outstandi Nature of D	ng Balance at Close of This Period 246.00
-	0.00 Amount Incurred This Period 246.00 C. Full Name (Last, First, Middle Initial) of Debtor of LPSD - Libertarian Party of South Dakota	0.00	Outstandi Nature of D	ng Balance at Close of This Period 246.00
_	O.00 Amount Incurred This Period 246.00 C. Full Name (Last, First, Middle Initial) of Debtor of LPSD - Libertarian Party of South Dakota Mailing Address P.O. Box 9341 City State	0.00 Or Creditor ZIP Code	Outstandi Nature of D Unified M to Affiliate	ng Balance at Close of This Period 246.00
	Amount Incurred This Period 246.00 C. Full Name (Last, First, Middle Initial) of Debtor of LPSD - Libertarian Party of South Dakota Mailing Address P.O. Box 9341 City State Rapid City SD	0.00 Or Creditor ZIP Code	Outstandi Nature of D Unified M to Affiliate	ng Balance at Close of This Period 246.00 eebt (Purpose): embership Payment
_	Amount Incurred This Period 246.00 C. Full Name (Last, First, Middle Initial) of Debtor of LPSD - Libertarian Party of South Dakota Mailing Address P.O. Box 9341 City State Rapid City SD Outstanding Balance Beginning This Period	0.00 Or Creditor ZIP Code	Outstandi Nature of D Unified M to Affiliate	ng Balance at Close of This Period 246.00 eebt (Purpose): embership Payment
-	Amount Incurred This Period 246.00 C. Full Name (Last, First, Middle Initial) of Debtor of LPSD - Libertarian Party of South Dakota Mailing Address P.O. Box 9341 City State Rapid City SD Outstanding Balance Beginning This Period 0.00	0.00 or Creditor ZIP Code 57709-9341	Outstandi Nature of D Unified M to Affiliate Tra Outstandi	ng Balance at Close of This Period 246.00 Pebt (Purpose): embership Payment Proceedings of the Period Per
_	Amount Incurred This Period 246.00 C. Full Name (Last, First, Middle Initial) of Debtor of LPSD - Libertarian Party of South Dakota Mailing Address P.O. Box 9341 City State Rapid City SD Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period	ZIP Code 57709-9341 Payment This Period 0.00	Outstandi Nature of E Unified M to Affiliate Outstandi	ng Balance at Close of This Period 246.00 Pebt (Purpose): embership Payment nsaction ID: SD10.180614 ng Balance at Close of This Period
1)	Amount Incurred This Period 246.00 C. Full Name (Last, First, Middle Initial) of Debtor of LPSD - Libertarian Party of South Dakota Mailing Address P.O. Box 9341 City State Rapid City SD Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 32.25	O.00 Or Creditor ZIP Code 57709-9341 Payment This Period 0.00	Outstandi Nature of E Unified M to Affiliate Outstandi	ng Balance at Close of This Period 246.00 Pebt (Purpose): embership Payment nsaction ID: SD10.180614 ng Balance at Close of This Period 32.25

PAGE 85 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPTN - Libertarian Party of Tennessee Mailing Address P.O. Box 2361 ZIP Code City State TN Cookeville 38502 Outstanding Balance Beginning This Period Transaction ID: SD10.180616 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 309.38 0.00 309.38 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPTX - Libertarian Party of Texas Mailing Address P.O. Box 56426 ZIP Code City State Houston 77256 TX Outstanding Balance Beginning This Period Transaction ID: SD10.180615 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 1481.50 0.00 1481.50 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment LPUT - Libertarian Party of Utah to Affiliate Mailing Address P.O. Box 526025 State ZIP Code City Salt Lake City UT 84152-6052 Outstanding Balance Beginning This Period Transaction ID: SD10.180617 0.00

1) SUBTOTALS This Period This Page (optional)	• [189	95.8	38	U
2) TOTALS This Period (last page this line number only)	•			 				U I
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	•							•
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	•							

Payment This Period

0.00

Outstanding Balance at Close of This Period

105.00

Amount Incurred This Period

105.00

PAGE 86 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPVA - Libertarian Party of Virginia Mailing Address 4201 Wilson Blvd Ste 100-164 City State ZIP Code VA 22203-1859 Arlington Outstanding Balance Beginning This Period Transaction ID: SD10.180619 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 953.00 0.00 953.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment to Affiliate LPVT - Libertarian Party of Vermont Mailing Address PO Box 5475 7IP Code City State Burlington VT 05402-5475 Outstanding Balance Beginning This Period Transaction ID: SD10.180618 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 68.63 0.00 68.63 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unified Membership Payment LPWA - Libertarian Party of Washington to Affiliate Mailing Address P.O. Box 7118 State ZIP Code City Bellevue WA 98008 Outstanding Balance Beginning This Period Transaction ID: SD10.180620 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 625.13 0.00 625.13 1646.76 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

SCHEDULE D (FEC Form 3X) Ε

(Use separate

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DEBTS AND OBLIGATIONS Excluding Loans		for	dule(s) each ered line)	FOR LINE NUMBER: (check only one) 9 X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor LPWV - Libertarian Party of West Virginia	or Creditor	lι		ebt (Purpose): embership Payment
Mailing Address PO Box 75423				
City State Charleston WV	ZIP Code 25375-5423			
Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.180621
0.00				
Amount Incurred This Period	Payment This Period		Outstandir	g Balance at Close of This Period
66.38	0.00)		66.38
B. Full Name (Last, First, Middle Initial) of Debtor LPWY - Libertarian Party of Wyoming	or Creditor	ι		ebt (Purpose): embership Payment
Mailing Address C/O Carol Blomquist 840 Christie Dr.				
City State Riverdon WY	ZIP Code 82501			
Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.180622
0.00				
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of This Period
38.25	0.00)		38.25
C. Full Name (Last, First, Middle Initial) of Debtor MSI-ACI Holding LLC	or Creditor	N		ebt (Purpose): search Non Candi-
Mailing Address 650 Park Avenue				
City State King of Prussia PA	ZIP Code 19406			
Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.180625
0.00				
Amount Incurred This Period	Payment This Period		Outstandir	g Balance at Close of This Period
4035.00	0.00	ס		4035.00
1) SUBTOTALS This Period This Page (optional)				4139.63
2) TOTALS This Period (last page this line number of	nly)	<u>. </u>		
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	. •		
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only	<u>, </u>		

(Use separate schedule(s)

PAGE 88 / 102 FOR LINE NUMBER:

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5		for each numbered line)	(check only one)	9			
Excluding Loans		Tidifibered lifte)		X 10			
NAME OF COMMITTEE (In Full)							
Libertarian National Committee							
A. Full Name (Last, First, Middle Initial) of Debtor or	Creditor	Nature of F	Jeht (Purpose):				
MV Global			Nature of Debt (Purpose): Telephone Systems				
			,				
Mailing Address 932 Sligo Ave							
City State	ZIP Code						
Silver Spring MD	20910						
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.80	0546			
630.00							
Amount Incurred This Period	Downant This Davied	Outstandi	na Dalamaa at Class of "	This Davied			
Amount Incurred This Period Payment This Period			ng Balance at Close of	Triis Period			
0.00	0.00			630.00			
B. Full Name (Last, First, Middle Initial) of Debtor or	Creditor		ebt (Purpose):				
Ed Nagel		Advertisir	ng				
Mailing Address - DO Boy 2002							
Mailing Address PO Box 2823							
City State	ZIP Code						
Santa Fe NM	87504-2823						
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.3	2982			
105.00							
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of	This Period			
0.00	0.00			105.00			
C. Full Name (Last, First, Middle Initial) of Debtor or	Creditor	Nature of D	ebt (Purpose):				
NetFire.com - Speakeasy		Internet H	losting Services				
Mailing Address c/o Speakeasy Accounts Rec	eivable						
1201 Western Ave. City State	ZIP Code						
Seattle WA	98101						
Outstanding Balance Beginning This Period		T		71004			
		ıra	nsaction ID: SD10.1	/ 1294			
280.37							
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of	This Period			
0.00	0.00			280.37			
0.00	0.00			200.57			
1) SUBTOTALS This Period This Page (optional)		. •]	1015	.37			
				1 1			
2) TOTALS This Period (last page this line number only	y)	▶					
3) TOTALS OUTSTANDING LOANS from Schedule (C (last page only)	. •					
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	-					
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(Use separate schedule(s) for each

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FOR LINE NUMBER: (check only one)

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Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):
P Samuel New			h Reimbursement
Mailing Address 1000 T Ct NIM			
Mailing Address 1308 T St NW			
City State	ZIP Code		
Washington DC	20009		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.69887
88.81			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00	· · · ·	88.81
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		ebt (Purpose):
P Samuel New		Petty Cas	h Reimbursement
Mailing Address 1308 T St NW			
1000 1 01111			
City State Washington DC	ZIP Code 20009		
	20009		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.80549
270.01			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		270.01
C. Full Name (Last, First, Middle Initial) of Debtor Tom Pilitowski	or Creditor	Nature of D Advertisin	ebt (Purpose):
TOTT FIIILOWSKI		Auvertisii	9
Mailing Address 3280-55A Tamiami Trail #2	297		
City State	ZIP Code		
Port Charlotte FL	33952		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.19575
19.50			
Amount Incurred This Period	Decement This Deviced	المستخدمة	on Delever at Olean of This Device
	Payment This Period	Outstandii	ng Balance at Close of This Period
0.00	0.00		19.50
1) SUBTOTALS This Period This Page (optional)		>	378.32
O) TOTALO THE DESCRIPTION OF THE PROPERTY OF T		_ =	1 1 1 1 1 1
2) TOTALS This Period (last page this line number of	oniy)	_ >	
3) TOTALS OUTSTANDING LOANS from Schedu	le C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page only)	>	

(Use separate schedule(s)

PAGE 90 / 102 FOR LINE NUMBER:

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Excluding Loans		numbered line)	(Check only one) X 10		
NAME OF COMMITTEE (In Full) Libertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tom Pilitowski			Nature of Debt (Purpose): Advertising		
Mailing Address 3280-55A Tamiami Trail #29	7				
City State Port Charlotte FL	ZIP Code 33952				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.19576		
19.50					
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period		
0.00	0.00		19.50		
B. Full Name (Last, First, Middle Initial) of Debtor of Tom Pilitowski	r Creditor	Nature of D Advertisin	ebt (Purpose): g		
Mailing Address 3280-55A Tamiami Trail #29	7				
City State Port Charlotte FL	ZIP Code 33952				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.19577		
19.50					
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period		
0.00	0.00		19.50		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tom Pilitowski			Nature of Debt (Purpose): Advertising		
Mailing Address 3280-55A Tamiami Trail #29	7				
City State Port Charlotte FL	ZIP Code 33952				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.19578		
19.50					
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period		
0.00	0.00		19.50		
1) SUBTOTALS This Period This Page (optional)		. •	58.50		
2) TOTALS This Period (last page this line number only)		. •			
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	. •			
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	>			

(Use separate schedule(s) for each

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FOR LINE NUMBER:		
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Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)	_		
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor o Tom Pilitowski	r Creditor	Nature of E Advertisin	Debt (Purpose):
Mailing Address 3280-55A Tamiami Trail #29	7		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Tra	insaction ID: SD10.19579
19.50			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		19.50
B. Full Name (Last, First, Middle Initial) of Debtor o Tom Pilitowski	r Creditor	Nature of E Advertisin	Debt (Purpose):
Mailing Address 3280-55A Tamiami Trail #29	7		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Tra	insaction ID: SD10.19580
19.50			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		19.50
C. Full Name (Last, First, Middle Initial) of Debtor of Tom Pilitowski	r Creditor	Nature of E Advertisin	Debt (Purpose):
Mailing Address 3280-55A Tamiami Trail #29	7		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.19581
19.50			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		19.50
1) SUBTOTALS This Period This Page (ontional)		•	58.50
SUBTOTALS This Period This Page (optional)		-	
TOTALS OUTSTANDING LOANS from Schedule C (last page only)		_ _	
4) ADD 2) and 3) and carry forward to appropriate line		- - -	

(Use separate schedule(s)

PAGE 92 / 102 FOR LINE NUMBER:

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Excluding Loans		for each numbered line)	(check only one) 9 X 10		
NAME OF COMMITTEE (In Full)		,			
Libertarian National Committee					
A Full Name (Lock First Middle Initial) of Debter a	v Overditer	Nations of D	alat (Dumana)		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Roger Pope			Nature of Debt (Purpose): Ballot access petitioning		
-			,		
Mailing Address 1916-C Wilmette Ave					
City State	ZIP Code				
Wilmette IL	60091				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.37009		
726.00					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00	0.00		726.00		
B. Full Name (Last, First, Middle Initial) of Debtor of Prospect Tech	r Creditor		ebt (Purpose):		
Trospect recit		tems Maii	and Telephone Sys- ntenanc		
Mailing Address 3246 Prospect St NW					
City State	ZIP Code				
Washington DC	20007				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.177686		
749.00					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00	749.00		0.00		
C. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor		ebt (Purpose):		
Prospect Tech		tems Maii	and Telephone Sys- ntenanc		
Mailing Address 3246 Prospect St NW					
City State	ZIP Code				
Washington DC	20007				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.180626		
0.00					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
5419.00	0.00		5419.00		
3419.00	0.00		3419.00		
			6145.00		
1) SUBTOTALS This Period This Page (optional)			0145.00		
2) TOTALS This Period (last page this line number on	ly)	. >			
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	•			
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last nage only)	- -			
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SCHEDULE D (FEC Form 3X)

(Use separate

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FOR LINE NUMBER:
(check only one)

DEBTS AND OBI	LIGATIONS		schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one) 9
NAME OF COMMIT	, ,	<u> </u>		1 1 2 2
Libertarian Nation	ial Committee			
A. Full Name (La QUI1 - Quill Co	ast, First, Middle Initial) of Debtor orporation	or Creditor	Nature of D Office Sup	ebt (Purpose): oplies
Mailing Address	PO Box 94081			
City State Palatine	te IL	ZIP Code 60094-4801		
Outstanding Ba	alance Beginning This Period		Tra	nsaction ID: SD10.171295
	201.40			
Amount	Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
	0.00	0.00		201.40
B. Full Name (La Richard Rider	ast, First, Middle Initial) of Debtor	or Creditor	Nature of D Advertisin	ebt (Purpose): g
Mailing Address	10969 Red Cedar Dr			
City Stat San Diego	te CA	ZIP Code 92131-1306		
Outstanding Ba	alance Beginning This Period		Tra	nsaction ID: SD10.34465
	137.50			
Amount	Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
	0.00	0.00		137.50
C. Full Name (La Steve Rosa	ast, First, Middle Initial) of Debtor	or Creditor	Nature of D Non Cand lishing Se	ebt (Purpose): lidate Desktop Pub- rvice
Mailing Address	4829 West Braddock Road	, Apt 3		
City Stat Alexandria	te VA	ZIP Code 22311		
Outstanding Ba	alance Beginning This Period 457.50		Tra	nsaction ID: SD10.177687
Amount	Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
	0.00	457.50		0.00
1) SUBTOTALS T	his Period This Page (optional)		•	338.90
2) TOTALS This Pe	eriod (last page this line number o	only)	>	
3) TOTALS OUTST	TANDING LOANS from Schedu	le C (last page only)	>	

SCHEDULE D (FEC Form 3X) D E

(Use separate

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EBTS AND OBLIGATIONS excluding Loans			lule(s) each red line)	FOR LINE NUMBER: (check only one) 9
NAME OF COMMITTEE (In Full) Libertarian National Committee				[\
A. Full Name (Last, First, Middle Initial) of Debtor Steve Rosa	or Creditor	L		ebt (Purpose): I Report Non Cand-
Mailing Address 4829 West Braddock Road	, Apt 3			
City State Alexandria VA	ZIP Code 22311			
Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period 487.50	Payment This Period			nsaction ID: SD10.180627 ng Balance at Close of This Period 487.50
B. Full Name (Last, First, Middle Initial) of Debtor State Farm Insurance Com	or Greditor	_	ature of Di Isurance	ebt (Purpose):
Mailing Address PO Box 680001	710.0			
City State Dallas TX	ZIP Code 75368-0001			
Outstanding Balance Beginning This Period 447.00 Amount Incurred This Period 0.00	Payment This Period 0.00			nsaction ID: SD10.171257 ng Balance at Close of This Period 447.00
C. Full Name (Last, First, Middle Initial) of Debtor Corey Stern	or Creditor		ature of Dod dvertisin	ebt (Purpose): g
Mailing Address 7708 Arboretum Village Cir				
City State Chanhassen MN	ZIP Code 55317-4426			
Outstanding Balance Beginning This Period 48.75			Trai	nsaction ID: SD10.32992
Amount Incurred This Period	Payment This Period	- '	Outstandir	ng Balance at Close of This Period
0.00	0.00	0		48.75
1) SUBTOTALS This Period This Page (optional)		•		983.25
2) TOTALS This Period (last page this line number of	nly)	<u>.</u> ▶		
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	.		* * * * * * * * * * * * * * * * * * * *
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only	·) •		

(Use separate schedule(s) for each

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FOR LINE NUMBER:
(check only one)

DEBTS AND OBLIGATIONS	for eac	ch	(check only one) 9
Excluding Loans numb		d line)	X 10
NAME OF COMMITTEE (In Full)		•	
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Note	ıra of Dob	ot (Burnoss):
Corey Stern		re or Dec rertising	ot (Purpose):
Soloy Storii	7 1.5.1	o	
Mailing Address 7708 Arboretum Village Cir.			
City State ZIP Code			
Chanhassen MN 55317-4426			
Outstanding Balance Beginning This Period		Trans	saction ID: SD10.32993
48.75			
	0		Delegan of Olean of This Desired
Amount Incurred This Period Payment This Period	Ou	itstanding	Balance at Close of This Period
0.00)		48.75
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Natu	ure of Deb	ot (Purpose):
Corey Stern		ertising	
Mailing Address 7708 Arboretum Village Cir.			
City State ZIP Code			
Chanhassen MN 55317-4426			
Outstanding Balance Beginning This Period		Trans	saction ID: SD10.32994
48.75			
Amount Incurred This Period Payment This Period	Ou	ıtstandina	Balance at Close of This Period
		, , , , , , , , , , , , , , , , , , ,	
0.00			48.75
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			ot (Purpose):
Telecompute Corporation	Tele	ephone S	Service
Mailing Address P.O. Box 106019			
Mailing Address F.O. Box 100019			
City State ZIP Code			
Atlanta GA 30348-6019			
Outstanding Balance Beginning This Period		Trans	saction ID: SD10.171296
70.13			
Amount Incurred This Period Payment This Period	Ou	itetandina	Balance at Close of This Period
		itstariurig	
0.00)		70.13
		-	467.60
1) SUBTOTALS This Period This Page (optional)	▶		167.63
2) TOTALS This Period (last page this line number only)	. •		
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	> [
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	_ ▶ [

SCHEDULE D (FEC Form 3X)

(Use separate

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DEBTS AND OBLIGATIONS		schedule(s) for each	FOR LINE NUMBER: (check only one) 9
Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Debt (Purpose):
Telecompute Corporation		reiepric	one Service
Mailing Address P.O. Box 106019			
City State	ZIP Code		
Atlanta GA	30348-6019		
Outstanding Balance Beginning This Period		Т	ransaction ID: SD10.175116
63.99			
Amount Incurred This Period	Payment This Period	Outstan	nding Balance at Close of This Period
0.00	63.99)	0.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Debt (Purpose):
Telecompute Corporation		reiepno	one Service
Mailing Address P.O. Box 106019			
City State	ZIP Code		
Atlanta GA	30348-6019		
Outstanding Balance Beginning This Period		Т	ransaction ID: SD10.175173
59.11			
Amount Incurred This Period	Payment This Period	Outstan	nding Balance at Close of This Period
0.00	59.11		0.00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of	f Debt (Purpose):
Telecompute Corporation		Telepho	one Service
Mailing Address P.O. Box 106019			
City State	ZIP Code		
Atlanta GA	30348-6019		
Outstanding Balance Beginning This Period		Т	ransaction ID: SD10.177688
61.09			
Amount Incurred This Period	Payment This Period	Outstan	nding Balance at Close of This Period
0.00	61.09		0.00
A) CURTOTALO, This B is 1711 B. (if it is			0.00
1) SUBTOTALS This Period This Page (optional)			
2) TOTALS This Period (last page this line number o	·····		
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	_ •	
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	>	

(Use separate schedule(s)

PAGE 97 / 102 FOR LINE NUMBER:

Seluding Loops		for each numbered line)	(check only one)	9 X 10	
Excluding Loans NAME OF COMMITTEE (In Full)		,			
Libertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Telecompute Corporation			Nature of Debt (Purpose): Telephone Service		
Mailing Address P.O. Box 106019					
City State Atlanta GA	ZIP Code 30348-6019				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.18	80628	
0.00		0 "	D. J. (1)	T D	
Amount Incurred This Period	Payment This Period		ng Balance at Close of		
52.25	0.00)		52.25	
B. Full Name (Last, First, Middle Initial) of Debtor of Tri-State	or Creditor		ebt (Purpose): ervices Non Can-		
Mailing Address Attn: Nancy/David 6900 Faigle Road					
City State Beltsville MD	ZIP Code 20705				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.1	10805	
65.00					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of	This Period	
0.00	0.00			65.00	
C. Full Name (Last, First, Middle Initial) of Debtor of Tri-State	or Creditor	Nature of D Printing S didate	ebt (Purpose): ervices Non Can-		
Mailing Address Attn: Nancy/David 6900 Faigle Road					
City State Beltsville MD	ZIP Code 20705				
Outstanding Balance Beginning This Period 564.80		Tra	nsaction ID: SD10.1	75117	
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of	This Period	
0.00	0.00			564.80	
SUBTOTALS This Period This Page (optional)		•	682	2.05	
2) TOTALS This Period (last page this line number of		>			
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	. >			
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only) >			

(Use separate schedule(s) for each

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OR LINE NUMBER:		
check only one)		ξ
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Excluding Loans		numbered line) X 10
NAME OF COMMITTEE (In Full)		
Libertarian National Committee		
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Tri-State		Printing Services Non Candidate
Mailing Address Attn: Nancy/David		
6900 Faigle Road		
City State Beltsville MD	ZIP Code 20705	
	20703	0010175174
Outstanding Balance Beginning This Period		Transaction ID: SD10.175174
2189.25		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2189.25
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Unity Design		Convention Logo Design
Mailing Address 13201 Amarillo Avenue		
City State Austin TX	ZIP Code 78729	
Outstanding Balance Beginning This Period		Transaction ID: SD10.180629
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
500.00	0.00	500.00
330.00	0.00	555.55
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
US LEC		Telephone and Data Services
Mailing Address PO Box 60130		
City State	ZIP Code	
Charlotte NC	28260-1310	
Outstanding Balance Beginning This Period		Transaction ID: SD10.175118
475.51		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	475.51	0.00
1) SUBTOTALS This Period This Page (optional)		▶ 2689.25
2) TOTALS This Period (last page this line number	only)	>
3) TOTALS OUTSTANDING LOANS from Schedu	ıle C (last page only)	>
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)	->

(Use separate schedule(s) for each

PAGE 99 / 102 FOR LINE NUMBER: (check only one)

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Excluding Loans		numbered line) X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee		
Libertarian National Committee		
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
US LEC		Data and Telephone Services
Mailing Address PO Box 60130		
City State Charlotte NC	ZIP Code 28260-1310	
Outstanding Balance Beginning This Period	20200 1010	Transaction ID: SD10.177693
1104.15		Transaction ib. 3D10.177093
	D . TI . D	0
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	550.00	554.15
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
US LEC		Telecom and Data Services
Mailing Address PO Box 60130		
Walling Address TO Box 00150		
City State Charlotte NC	ZIP Code 28260-1310	
Outstanding Balance Beginning This Period		Transaction ID: SD10.180631
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
552.39	0.00	552.39
332.33	0.00	552.59
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Walton Press		Printing/Mailing Non Candidate
Mailing Address 402 Mayfield Dr		
PO Box 966	ZIP Code	
City State Monroe GA	30655	
Outstanding Balance Beginning This Period		Transaction ID: SD10.175175
2115.74		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2115.74
A) CURTOTALO, This Desired This Deservice (sections)		3222.28
1) SUBTOTALS This Period This Page (optional)		
2) TOTALS This Period (last page this line number of	only)	>
3) TOTALS OUTSTANDING LOANS from Schedu	ile C (last page only)	>
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page only)	-

PAGE 100 / 102 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Candidate Printing/Ma-iling Walton Press Mailing Address 402 Mayfield Dr PO Box 966 ZIP Code City State 30655 Monroe GA Outstanding Balance Beginning This Period Transaction ID: SD10.177689 3328.43 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 3328.43 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): WAR1 - Warner, Norcross & Judd Legal Services Mailing Address 111 Lyon St NW Fith Third Center STE #900 State 7IP Code City **Grand Rapids** 49503-2487 MI Outstanding Balance Beginning This Period Transaction ID: SD10.175176 2500.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 2500.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): WAR1 - Warner, Norcross & Judd Legal Services Mailing Address 111 Lyon St NW Fith Third Center STE #900 State ZIP Code City **Grand Rapids** MΙ 49503-2487 Outstanding Balance Beginning This Period Transaction ID: SD10.177690 2500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2500.00

8328.43

1) SUBTOTALS This Period This Page (optional).....

2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

(Use separate schedule(s) for each

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FOR LINE NUMBER (chec

LINE NUMBER:		
ck only one)		9
	Х	10

Excluding Loans		numbered line)	X 10		
NAME OF COMMITTEE (In Full)					
Libertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor WAR1 - Warner, Norcross & Judd			Nature of Debt (Purpose): Legal Services		
Mailing Address 111 Lyon St NW					
Fith Third Center STE #900 City State	ZIP Code				
Grand Rapids MI	49503-2487				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.180632		
0.00					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
2694.69	0.00		2694.69		
B. Full Name (Last, First, Middle Initial) of Debtor of Washington Pension Center	or Creditor	Nature of D 401 K Pla	lebt (Purpose): In Fee		
Mailing Address 7315 Wisconsin Ave Ste 50	0 West				
City State Bethesda MD	ZIP Code 20814-3206				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.175121		
100.00		i i a	iisaction ib. 3D10.173121		
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00	0.00		100.00		
1) SUBTOTALS This Period This Page (optional)		•	2794.69		
2) TOTALS This Period (last page this line number of	nly)	<u> </u>	140186.25		
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	>			
4) ADD 2) and 3) and carry forward to appropriate lir	ne of Summary Page (last page only)	_ >			

Image# 26980146680

Form/Schedule: **F3XN**Transaction ID:

Please note the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate. 2) The Libertarian National Committee's (LNC) current 'Best Efforts' procedures for ascertaining contributor information result in from 87% to 90% compliance from contributors. The Committee requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR §104.7(b)(-1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is corrected in a subsequent amendment. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule: **SD9** (Current loan balance of 20.00 has been forgiven) (A previous settlement of 20.00 has been rescinded) Transaction ID: **SD9.15703**